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Fill in this information to identify your case:		
United States Bankruptcy Court for the:  Northern District of: Illinois (State)		
Case number (if known)	Chapter you are filing under:  Chapter 7	
	Chapter 11 Chapter 12 Chapter 13	Check if this is a amended filing

#### Official Form 101

### Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a joint case—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses Debtor 1 and Debtor 2 to distinguish between them. In joint cases, one of the spouses must report information as Debtor 1 and the other as Debtor 2. The same person must be Debtor 1 in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part 1: Identify Yourself		
	About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
Your full name	Carlos	
	First name	First name
Write the name that is on your government-issued	L.	
picture identification (for	Middle name	Middle name
example, your driver's license or passport	Cochran	
licerise of passport	Last name	Last name
Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2. All other names you		
have used in the last	First name	First name
8 years		
Include your married or	Middle name	Middle name
maiden names.	Last name	Last name
	First name	First name
	Middle name	Middle name
	Last name	Last name
3. Only the last 4 digits of your Social	XXX - XX- 0627	xxx - xx-
Security number or federal Individual	OR	OR
Taxpayer Identification number (ITIN)	9 xx - xx-	9 xx - xx-

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D	ebtor 1 Carlos First Name	L. Cochran  Middle Name Last Name	Case number (if known)
	i ii st ivaine	Wildele Warie Last Warie	
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer	I have not used any business names or EINs.	I have not used any business names or EINs.
	Identification Numbers (EIN) you have used in the last	Business name	Business name
	8 years	Business name	Business name
	Include trade names and doing business as names	EIN	EIN
		EIN	EIN
5.	Where you live		If Debtor 2 lives at a different address:
		14214 Kedzie Ave Number Street	Number Street
		Blue Island Illinois 60406	
		City State Zip Code	City State Zip Code
		Cook County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number Street	Number Street
		City State Zip Code	City State Zip Code
6.	Why you are choosing this district	Check one:	Check one:
	to file for bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		I have another reason. Explain. (See 28 U.S.C. §§ 1408.)	I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

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Debtor 1		L.	Cochran		Case number (if kno	own)	
	First Name	Middle Nam					
Part 2:	Tell the Court Abo	ut Your Bankrup	tcy Case				
Ban	chapter of the kruptcy Code you choosing to file er		brief description of each, see B2010)). Also, go to the top				ndividuals Filing for
8. How fee	you will pay the	more details cashier's che may pay with  I need to pay Individuals to judge may, b the official poyou choose to	entire fee when I file my about how you may pay. Took, or money order. If your a credit card or check with the fee in installments. If the fee in installments. If the fee in installments is a Pay Your Filing Fee in Installment is not required to, waive overty line that applies to you his option, you must fill out and file it with your petition	ypically, if you attorney is so a pre-printer of you choose stallments (Commay request a your fee, an your family signs the Application of the printer of th	ou are paying the submitting your ed address. e this option, sig official Form 103 this option only d may do so only ze and you are u	e fee yourself, payment on y and attach to A).  If you are filing the your incommon to pay to	you may pay with cash, our behalf, your attorney the Application for ag for Chapter 7. By law, a me is less than 150% of the fee in installments). If
banl	e you filed for kruptcy within the 8 years?	No.  ✓ Yes. District  District	Northern District of Illinois  Northern District of Illinois	When When When	9/25/2012 MM / DD / YYYY 6/27/2017 MM / DD / YYYY	Case number  Case number  Case number	12-38049 17-19303
case bein spou filing you, part	any bankruptcy es pending or g filed by a use who is not g this case with or by a business ner, or by an ate?	✓ No.  Yes. Debtor District Debtor District		When When	MM / DD / YYYY	Relationship to Case number, Relationship to Case number,	if known
	ou rent your dence?	✓ No.	e 12. r landlord obtained an eviction Go to line 12. Fill out <i>Initial Statement Abouthis</i> bankruptcy petition.			st You (Form 10	1A) and file it with

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Cochran Debtor 1 Carlos Case number (if known) First Name Middle Name Last Name Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole No. Go to Part 4. proprietor of any fullor part-time Yes. Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set Chapter 11 of the appropriate deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance Bankruptcy Code and sheet, statement of operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). are vou a small business debtor? I am not filing under Chapter 11. For a definition of small business debtor, No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the see 11 U.S.C. § Bankruptcy Code. 101(51D). Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have Ⅵ No. any property that Yes. What is the hazard? poses or is alleged to pose a threat of imminent and If immediate attention is needed, why is it needed? identifiable hazard to public health or safety? Or do you Where is the property? own any property Street Number that needs immediate attention? For example, do you own perishable goods, City State Zip Code or livestock that must be fed, or a building that needs urgent repairs?

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Debtor 1 Carlos L. Cochran Case number (if known)

First Name Middle Name Last Name

#### Part 5: Explain Your Efforts to Receive a Briefing About Credit Counseling About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case): You must check one: You must check one: 15. Tell the court whether you have ✓ I received a briefing from an approved credit I received a briefing from an approved credit received briefing counseling agency within the 180 days before I counseling agency within the 180 days before I about credit filed this bankruptcy petition, and I received a filed this bankruptcy petition, and I received a counseling. certificate of completion. certificate of completion. Attach a copy of the certificate and the payment plan, Attach a copy of the certificate and the payment plan, The law requires that if any, that you developed with the agency. if any, that you developed with the agency. you receive a briefing about credit I received a briefing from an approved credit I received a briefing from an approved credit counseling before you counseling agency within the 180 days before I counseling agency within the 180 days before I file for bankruptcy. filed this bankruptcy petition, but I do not have a filed this bankruptcy petition, but I do not have a certificate of completion. certificate of completion. You must truthfully check one of the Within 14 days after you file this bankruptcy petition, Within 14 days after you file this bankruptcy petition, following choices. If you MUST file a copy of the certificate and payment you MUST file a copy of the certificate and payment you cannot do so, you plan, if any. plan, if any. are not eligible to file. I certify that I asked for credit counseling services ☐ I certify that I asked for credit counseling services from an approved agency, but was unable to from an approved agency, but was unable to If you file anyway, the obtain those services during the 7 days after I obtain those services during the 7 days after I court can dismiss your made my request, and exigent circumstances made my request, and exigent circumstances case, you will lose merit a 30-day temporary waiver of the merit a 30-day temporary waiver of the whatever filing fee you requirement. requirement. paid, and your creditors can begin To ask for a 30-day temporary waiver of the To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what requirement, attach a separate sheet explaining what collection activities efforts you made to obtain the briefing, why you were efforts you made to obtain the briefing, why you were again. unable to obtain it before you filed for bankruptcy, and unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this what exigent circumstances required you to file this Your case may be dismissed if the court is dissatisfied Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before with your reasons for not receiving a briefing before you filed for bankruptcy. you filed for bankruptcy. If the court is satisfied with your reasons, you must still If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed. If you do not do so, your case may be dismissed. Any extension of the 30-day deadline is granted only Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days. for cause and is limited to a maximum of 15 days. I am not required to receive a briefing about credit I am not required to receive a briefing about credit counseling because of: counseling because of: I have a mental illness or a mental I have a mental illness or a mental Incapacity. Incapacity. deficiency that makes me deficiency that makes me incapable of realizing or making incapable of realizing or making rational decisions about finances. rational decisions about finances. Disability. Disability. My physical disability causes me to My physical disability causes me to be unable to participate in a be unable to participate in a briefing in person, by phone, or briefing in person, by phone, or through the internet, even after I through the internet, even after I reasonably tried to do so. reasonably tried to do so. Active duty. I am currently on active military Active duty. I am currently on active military duty in a military combat zone. duty in a military combat zone. If you believe you are not required to receive a briefing If you believe you are not required to receive a briefing about credit counseling, you must file a motion for about credit counseling, you must file a motion for waiver of credit counseling with the court. waiver of credit counseling with the court.

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Debtor 1 Carlos First Name	L. Middle Name	Cochran Last Name	Case number (if known)		
	16a. Are your debts "incurred by an No. Go to lin Yes. Go to lin No. Go to lin No. Go to lin Yes. Go to lin No. Go to lin Yes. Go to lin Yes. Go to lin Yes. Go to lin Yes. I am not filing	primarily consumer debtindividual primarily for a prime 16b. ne 16. primarily business debts in the 16c. ne 17. f debts you owe that are not under Chapter 7. Go to line 1 are Chapter 7. Do you estimate the primarily business or investment or three the 16c.	ersonal, family, or household a sersonal, family, or household a sersonal, family, or household are debts to bugh the operation of the bught consumer debts or business.	hat you incurred to obtain usiness or investment.  ess debts.  ty is excluded and administrative	
property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☐ No.	paid that fullus will be availa	bie to distribute to unsecured C	reditors?	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	5,001	-5,000 [ -10,000 [ 1-25,000 [	25,001-50,000 50,001-100,000 More than 100,000	
19. How much do you estimate your assets to be worth?	\$0-\$50,000 \$50,001-\$100,00 \$100,001-\$500,0 \$500,001-\$1 mill	0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
20. How much do you estimate your liabilities to be?	\$0-\$50,000  \$50,001-\$100,00  \$100,001-\$500,0  \$500,001-\$1 mill	0	0,001-\$10 million 00,001-\$50 million 00,001-\$100 million 000,001-\$500 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion	
Part 7: Sign Below					
For you	correct.  If I have chosen to file of title 11, United Sta under Chapter 7.	under Chapter 7, I am aw tes Code. I understand the	are that I may proceed, if elig relief available under each o	information provided is true and gible, under Chapter 7, 11,12, or 13 chapter, and I choose to proceed is not an attorney to help me fill	
	If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.				
	I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	/s/ Carlos Cochr	an	×		
	Signature of Debtor		Signature of Deb	tor 2	
	Executed on	6/28/2018 MM / DD / YYYY	Executed on _	MM / DD / YYYY	

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Debtor 1 Carlos	L.	Cochran	Case number (if k	known)
First Name	Middle Name	Last Name		
For your attorney, if you are represented by one	eligibility to proceed un	der Chapter 7, 11, 12,	or 13 of title 11, United	ave informed the debtor(s) about d States Code, and have explained the lso certify that I have delivered to the
If you are not		-		which § 707(b)(4)(D) applies, certify that I
represented by an				ules filed with the petition is incorrect.
attorney, you do not	•			
need to file this page.	/s/ Morsheda Hash	em	Date	6/28/2018
	Signature of Attorney	****	MI	M / DD / YYYY
	Morsheda Hashem			
	Printed name			
	Semrad Law Firm			
	Firm name			
	11101 S. Western Ave	enue		
	Street			
	Chicago		Illinois	60643
	City		State	Zip Code
	Contact phone	3129130625	Fire all and disease	
	Contact phone	0123100023	Email address	mhashem@semradlaw.com
	Bar number		State	

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Fill in this information to identify your case:						
Debtor 1	Carlos	L.	Cochran			
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse, if filing)	First Name	Middle Name	Last Name			
United States E	Bankruptcy Court for the:	Northern	District of Illinois			
Case number			(State)			
(If known)			_			

Check if this is an
amended filing

#### Official Form 106Sum

#### Summary of Your Assets and Liabilities and Certain Statistical Information 12/1

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page.

	<b>Your assets</b> Value of what you own
1. Schedule A/B: Property (Official Form 106A/B)	,
1a. Copy line 55, Total real estate, from Schedule A/B	\$0.00
1b. Copy line 62, Total personal property, from Schedule A/B	\$10,042.50
1c. Copy line 63, Total of all property on Schedule A/B	\$10,042.50
Part 2: Summarize Your Liabilities	
	Your liabilities Amount you owe
2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D)  2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$21,920.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$493.00
	\$39,265.00
	\$61,678.00
3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F)  3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$39,26
Summarize Your Income and Expenses	
Schedule I: Your Income (Official Form 106I)  Copy your combined monthly income from line 12 of Schedule I	\$1,311.74
5. Schedule J: Your Expenses (Official Form 106J)	

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Deb	otor 1 Carlos	L.	Cochran	Case number (if known)					
	First Name	Middle Name	Last Name						
Part	4: Answer These Qu	estions for Administrat	ive and Statistical Records						
6. <b>A</b>	re you filing for bankrupt	cy under Chapters 7, 11, o	13?						
	No. You have nothing t  Yes.	o report on this part of the fo	rm. Check this box and submit thi	s form to the court with your other so	chedules.				
	Vhat kind of debt do you h	nave?							
E			mer debts are those incurred by ar ill out lines 8-10 for statistical purp	individual primarily for a personal, oses. 28 U.S.C. § 159.					
		imarily consumer debts. Yo ith your other schedules.	u have nothing to report on this p	art of the form. Check this box and s	ubmit				
		our Current Monthly Income Form 122B Line 11; <b>OR</b> , Fo	e: Copy your total current monthly rm 122C-1 Line 14.	income from Official	\$1,076.79				
9.	Copy the following spec	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:							
	From Part 4 on Schedul	e E/F, copy the following:	Total claim						
	9a. Domestic support obli	gations (Copy line 6a.)		\$0.00					
	9b. Taxes and certain other	er debts you owe the governr	ment. (Copy line 6b.)	\$493.00					
	9c. Claims for death or pe	rsonal injury while you were i	ntoxicated. (Copy line 6c.)	\$0.00					
	9d. Student loans. (Copy	d. Student loans. (Copy line 6f.)		\$20,608.00					
	9e. Obligations arising our priority claims. (Copy line		r divorce that you did not report as	\$0.00					
	9f. Debts to pension or pr	ofit-sharing plans, and other	similar debts. (Copy line 6h.)	\$0.00					

\$21,101.00

9g. **Total.** Add lines 9a through 9f.

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Fill in this	information to identify your ca	ase:			
Debtor 1	Carlos	L.	Cochran		
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if f	iling) First Name	Middle Name	Last Name		
United St	ates Bankruptcy Court for the:	Northern	District of Illinois		
Case nun	nber		(State)		
Officia	al Form 106A/B				Check if this is an amended filing
Sche	dule A/B: Prope	rty			12/1
category responsib write you	where you think it fits best. B le for supplying correct inforr r name and case number (if k	e as complete and a nation. If more space nown). Answer every	n asset only once. If an asset fits in mo ocurate as possible. If two married peo is needed, attach a separate sheet to question. or Other Real Estate You Own or I	ople are filing together, both a this form. On the top of any a	re equally
1. Do yo	u own or have any legal or eq No. Go to Part 2	uitable interest in an	y residence, building, land, or similar p	property?	
	Yes. Where is the property?				
1.1	Street address, if available, or o		at is the property? Check all that apply. Single-family home Duplex or multi-unit building	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.
			Condominium or cooperative  Manufactured or mobile home	Current value of the entire property?	Current value of the portion you own?
	Number Street  City State	Zip Code	Land Investment property Timeshare Other	Describe the nature or interest (such as fee see the entireties, or a life	imple, tenancy by
	ony cano		o has an interest in the property? Chece.  Debtor 1 only		mmunity property
			Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another		
		Oti	ner information you wish to add about	this item, such as local	
If you	own or have more than one, lis		perty identification number:		
1.2	Street address, if available, or o	Wh	at is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	the amount of any secu	claims or exemptions. Put red claims on <i>Schedule D:</i> ims Secured by Property.  Current value of the
			Manufactured or mobile home  Land	entire property?	portion you own?
	Number Street		Investment property Timeshare	Describe the nature or interest (such as fee sthe entireties, or a life	imple, tenancy by
	City State	Zip Code  Wh one	Other o has an interest in the property? Chec	Check if this is co	mmunity property
			ner information you wish to add about operty identification number:	this item, such as local	

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Debtor 1	Carlos First Name	L. Middle Name	Cochran Last Name	Case numbe	r (if known)	
1.3 Stre	eet address, if available, or of		What is the property? Check all that Single-family home Duplex or multi-unit building Condominium or cooperative Manufactured or mobile home	at apply.	the amount of any secu	claims or exemptions. Put red claims on Schedule D: ims Secured by Property.  Current value of the portion you own?
Nui	mber Street  State	Zip Code	Land Investment property Timeshare Other		Describe the nature of interest (such as fee s the entireties, or a life	imple, tenancy by
		[ [ [ ]	Who has an interest in the proper Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and a	unother	Check if this is co (see instructions)  such as local	mmunity property
	the dollar value of the po ve attached for Part 1. W	rtion you own for a rite that number h	all of your entries from Part 1, incere.	cluding any entrie	s for pages	
<b>Do you o</b> v you own t		equitable interest you lease a vehicle,	in any vehicles, whether they ar also report it on Schedule G: Execu- cycles	-	-	
☐ No						
3.1	Model: Year:	Hyundai Elantra 2017	Who has an interest in the prone.  Debtor 1 only	operty? Check	the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information: 2017 Hyundai Elantra	70000	Debtor 2 only Debtor 1 and Debtor 2 only  At least one of the debtors	and another	Current value of the entire property? \$18985.00	Current value of the portion you own? \$9492.50
3.2	Make Model: Year:		who has an interest in the prone. Debtor 1 only		the amount of any secu	claims or exemptions. Put ured claims on <i>Schedule D:</i> nims Secured by Property.
	Approximate mileage: Other information:		Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors: Check if this is communit instructions)	and another	Current value of the entire property?	Current value of the portion you own?

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ke del: ur: proximate mileage: ner information:  ke del: ur: proximate mileage: ner information:		Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a Check if this is community instructions)  Who has an interest in the proone. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	nd another / property (see	the amount of any secucreditors Who Have Classifications who have Classifications with the control of the entire property?  Do not deduct secured the amount of any secured control of the entire property?	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?  claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the
del: ar: proximate mileage:		one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only	pperty? Check	the amount of any secu Creditors Who Have Cla	ured claims on Schedule D: aims Secured by Property.
		_ <b></b>		entire property?	portion you own?
	•	Check if this is community instructions)  r recreational vehicles, other ve fishing vessels, snowmobiles, mo	y property (see chicles, and acce		
ke del: ur: proximate mileage: ner information:		one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	nd another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
ke del: ur: proximate mileage: ner information:		one.  Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors a	nd another	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: aims Secured by Property.  Current value of the portion you own?
k d	lel: : roximate mileage: er information:  e lel: : roximate mileage: er information:	el: :- :- :- :- :- :- :- :- :- :- :- :- :-	one.  Debtor 1 only Debtor 2 only Debtor 2 only  At least one of the debtors a Check if this is community instructions)  Who has an interest in the proone.  Debtor 1 only Debtor 2 only  Who has an interest in the proone.  Debtor 1 only Debtor 2 only Debtor 2 only Debtor 2 only At least one of the debtors a Check if this is community instructions)  Check if this is community instructions)	one. Debtor 1 only Debtor 2 only Debtor 3 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 only Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)  At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secucreditors Who Have Class  Debtor 1 only  Debtor 2 only  Debtor 2 only  At least one of the debtors and another  Check if this is community property (see instructions)  Who has an interest in the property? Check one.  Debtor 1 only  Debtor 1 only  Current value of the entire property?  Do not deduct secured the amount of any secucred the amount of a

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De	ebtor 1	Carlos First Name	L.	dle Name	Cochran Last Name	Case number (if known)	
Pa	rt 3:		our Personal and I				
D	o you	own or hav	e any legal or equi	table interest in	n any of the follow	ving items?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
			and furnishings liances, furniture, linens	s, china, kitchenwa	ıre		
✓	No						
	Yes. [	Describe					
		t <b>ronics</b> les: Television	s and radios; audio, vic	deo, stereo, and dig	gital equipment; comp	outers, printers, scanners; music	1
N V		Describe	Cell phone				¢225 00
¥							\$225.00
			ue and figurines; paintings in, or baseball card col				
넴		Describe					
ш							
		les: Sports, ph	rts and hobbies otographic, exercise, a s; carpentry tools; mus		uipment; bicycles, po	ol tables, golf clubs, skis; canoes	
✓	No						1
Ш	Yes. [	Describe					
	<b>0. Fire</b> Examp		es, shotguns, ammuni	ition, and related ed	quipment		1
✓	No						1
Ш	Yes. L	Describe					
	<b>1. Clo</b> t Examp		clothes, furs, leather co	ats, designer wear,	shoes, accessories		
	No	S					1
⊻	Yes. L	Describe	Used Clothing				\$325.00
		-		y, engagement ring	gs, wedding rings, hei	irloom jewelry, watches, gems,	
띨	No Voc. F	Describe					1
Ш	100. L	2030HDE					
		<b>ı-farm animal</b> ıles: Dogs, cats	s, birds, horses				
✓	No						1
Ш	Yes. E	Describe					
1	4. Any	other person	al and household ite	ms you did not all	ready list, including	any health aids you did not list	1
✓	No						
	Yes. [	Describe					
			•	· · · · · · · · · · · · · · · · · · ·		for pages you have attached	\$550.00

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Debt	or 1 Carlos	L.	Cochran	Case number (if known)	
	First Name	Middle Name	Last Name		_
Part 4	Describe Your F	inancial Assets			
Doy	you own or have any	y legal or equitable interes	t in any of the followin	g?	Current value of the portion you own?  Do not deduct secured claims or exemptions.
16. <b>(</b>		ve in your wallet, in your home, ir	n a safe deposit box, and o	n hand when you file your petition	
	=			Cash:	
17.		avings, or other financial accounts stitutions. If you have multiple ac		ares in credit unions, brokerage houses, aution, list each.	
	No ✓ Yes		Institution name:		
		17.1. Checking account:	Go Bank		\$0.00
		17.2. Checking account:	_		
		17.3. Savings account:			· -
		17.4. Savings account:			
		17.5. Certificates of deposit:			
		17.6. Other financial account:			
		17.7. Other financial account:			
		17.8. Other financial account:			
		17.9. Other financial account:			
18.	Examples: Bond funds,	or publicly traded stocks investment accounts with broke	rage firms, money market a	occounts	
	✓ No Yes	Institution or issuer name:			
19.	Non-publicly traded st an LLC, partnership, a		ated and unincorporated	businesses, including an interest in	
	✓ No  Yes. Give specific information about them	Name of entity		% of ownership:	

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Debt	tor 1 Carlos	<u>L.</u>	Cochran	Case number (if known)	
	First Name	Middle Name	Last Name		
20.	Negotiable instruments Non-negotiable instrum	orate bonds and other negotial include personal checks, cashiers' ents are those you cannot transfer	checks, promissory not	es, and money orders.	
	Yes. Give specific information about them	Issuer name:			
21.	Retirement or pension		thrift savings accounts	or other pension or profit-sharing plans	
	No No	", Ellio, (100gii, 101(i), 100(b)	, anne davingo addounto	or early perioder or profit entaining plane	
	Yes. List each	Type of account:	Institution name:		
	account	401(k) or similar plan:			
	separately.	Pension plan:			
		IRA:			_
		Retirement account:			
		Keogh:			
		Additional account:			
		Additional account:			
22.		prepayments I deposits you have made so that with landlords, prepaid rent, public			
	Yes	Electric:			· <del></del>
		Gas:			
		Heating oil:			
		Security deposit on rental unit:			
		Prepaid rent:			
		Telephone:			
		Water:			·
		Rented furniture:			· .
		Other:			<u> </u>
23.	Annuities (A contract fo	or a periodic payment of money to	you, either for life or for	a number of years)	
	✓ No ☐ Yes	Issuer name and description:			

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Debt	or 1 Carlos	L. Cochran Case number (if known)	_
0.4	First Name	Middle Name Last Name	
24.		an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition p 530(b)(1), 529A(b), and 529(b)(1).	orogram.
	✓ No		
	<b>H</b>	Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c):	
	Yes		
25.	Truete equits	able or future interests in property (other than anything listed in line 1), and rights or powers	
25.		for your benefit	
	<b>✓</b> No		
	Yes. Desc	cribe	
	_		
26.	Patents, copy	pyrights, trademarks, trade secrets, and other intellectual property	
		ernet domain names, websites, proceeds from royalties and licensing agreements	
	<b>✓</b> No		
	Yes. Desc	cribe	
27.	Licenses, fra	unchises, and other general intangibles	
	Examples: Bui	cilding permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses	3
	<b>✓</b> No		
	Yes. Desc	cribe	
Mor	nev or proper	rty owed to you?	Current value of the
Mor	ney or proper	rty owed to you?	Current value of the portion you own?
Mor	ney or proper	rty owed to you?	<pre>portion you own? Do not deduct secured</pre>
	ney or proper		portion you own?
			<pre>portion you own? Do not deduct secured</pre>
	Tax refunds ov		<pre>portion you own? Do not deduct secured</pre>
	Tax refunds ov  ✓ No  — Yes. Give s abou	wed to you  specific information ut them, including whether	portion you own? Do not deduct secured claims or exemptions.
	Tax refunds ov  No Yes. Give s abou you a	wed to you specific information Federal:	portion you own? Do not deduct secured claims or exemptions.  \$0.00
28.	Tax refunds on No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.
28.	Tax refunds on  No Yes. Give s abou you a and t	specific information ut them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family suppor Examples: Past	specific information at them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information at them, including whether already filed the returns the tax years  It turns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information  It them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information  It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property specific information  Alimony:  Maintenance	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  settlement  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information  It them, including whether already filed the returns the tax years	portion you own? Do not deduct secured claims or exemptions.  \$0.00  \$0.00  \$0.00  \$0.00  \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information  It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property specific information  Alimony:  Maintenance	portion you own? Do not deduct secured claims or exemptions.  \$0.00 \$0.00 \$0.00  settlement  \$0.00 \$0.00  settlement
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past	specific information It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property specific information  Alimony: Maintenance Support:	## solution ## sol
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past No Yes. Give s  Other amount	specific information  It them, including whether already filed the returns the tax years	\$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family support Examples: Past No Yes. Give s  Other amount Examples: Unp	specific information  It them, including whether already filed the returns the tax years  It due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property specific information  Alimony:  Maintenance Support:  Divorce settle Property settle	\$0.00 \$0.00
28.	Tax refunds on  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unp Soc	specific information ut them, including whether already filed the returns the tax years	\$0.00 \$0.00
28.	Tax refunds ov  No Yes. Give s about you a and t  Family suppor Examples: Past  No Yes. Give s  Other amount Examples: Unpp	specific information at them, including whether already filed the returns the tax years	\$0.00 \$0.00
29.	Tax refunds on  ✓ No  Yes. Give s about you a and t  Family support Examples: Past ✓ No  Yes. Give s  Other amount Examples: Unp Soc ✓ No	specific information at them, including whether already filed the returns the tax years	\$0.00 \$0.00

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Deb	tor	1 Carlos	L.	Cochran	Case number (if known)	
		First Name	Middle Name	Last Name		
31.		terests in insurance camples: Health, disab		alth savings account (HSA); credit, h	omeowner's, or renter's insurance	
		No Yes. Name the insu of each policy and		Company name:	Beneficiary:	Surrender or refund value:
32.	lf :		y of a living trust, expect p	someone who has died proceeds from a life insurance policy	v, or are currently entitled to receive	_
	<u>-</u>	No Yes. Describe				
33.				you have filed a lawsuit or made irance claims, or rights to sue	a demand for payment	
	<b>∠</b>	No Yes. Describe				
34.		ther contingent and set off claims	unliquidated claims of	every nature, including counterc	laims of the debtor and rights	
	<u>~</u>	No Yes. Describe				
35.	Ar	ny financial assets y No	ou did not already list			
	Ē	Yes. Describe				
36.			-	n Part 4, including any entries fo		
		_				
Part 37.		_		perty You Own or Have an Ir	terest In. List any real estate in Pa	rt 1.
		No Code Ded C	.,	,	,,,,,,	Current value of the portion you own? Do not deduct secured claims or exemptions
38.	Ac	counts receivable	or commissions you alre	eady earned		P. C.
		No Yes. Describe				
39.			nishings, and supplies ated computers, software	, modems, printers, copiers, fax ma	chines, rugs, telephones, desks, chairs, ele	ectronic devices
	<b>∠</b>	No Yes. Describe				

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Deb	tor 1 Carlos First Name	L. Middle Name	Cochran Last Name	Case number (if known)	
40.			e in business, and tools of yo	ur trade	
	—	. ча.ро, одрроо јод ао			
	Yes. Describe				
	ш				
41	Inventory				
41.	—				
	Yes. Describe				
	Tes. Describe				
		<u> </u>			
42.	Interests in partnersh	nips or joint ventures			
	✓ No	N	ame of entity:	% of ownership:	
	Yes. Give specific information about		•	·	
	them	_			<u> </u>
		_			
		_			
43.	Customer lists, mailing	g lists, or other compilation	ns		
	No				
	Yes. Do your lists	include personally identifiable	e information (as defined in 11 U	I.S.C. § 101(41A))?	
	☐ No				
	Yes. Desc	cribe			
44.	Any business-related	property you did not alrea	dv list		
	—		•		
	Yes. Give specific	_			<del></del>
	information	<del>-</del>			
		_			
		_			<del>_</del>
		_			<del>_</del>
		_			
45 A	dd the dellar value of	all of your ontrine from Par	t 5 including any entries for	nages you have attached	
		er here	t 5, including any entries for	pages you have attached	
	Describe Any F	arm- and Commercial	Fishing-Related Property	You Own or Have an Interest In.	
Part		n interest in farmland, list it in F		Tod Own of Have all interest in.	
46.	Do you own or have a	any legal or equitable inter	est in any farm- or commerci	al fishing-related property?	
	No. Go to Part 7.				Current value of the
	Yes. Go to line 47				portion you own?  Do not deduct secured claims
	_				or exemptions
47.	Farm animals Examples: Livestock. p	ooultry, farm-raised fish			
	— ».	,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
	Yes. Describe				

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Debt	or 1 Carlos First Name	L. Middle Neme	Cochran	Case number (if known)	
40		Middle Name	Last Name		
48.	Crops-either growing o	r harvested			
	✓ No				
	Yes. Describe				
	_				
49.	Farm and fishing equip	ment, implements, machinery, f	ixtures, and tools of trade	e	
	<b>✓</b> No				
	Yes. Describe				
	-				
50.	Farm and fishing suppli	es, chemicals, and feed			
	<b>✓</b> No				
	Yes. Describe				
	_				
		<del></del> -			
51.	Any farm- and commerc	cial fishing-related property you	i did not already list		
	<b>✓</b> No				
	Yes. Describe				
	-	<del></del>		Г	
		of your entries from Part 6, inc			
for Pa ▶	irt 6. Write that number	here			
				_	
	D 11 AU D				
Part 1		erty You Own or Have an Ir		d Not List Above	
53.		<b>erty of any kind you did not alre</b> , country club membership	ady list?		
	_ `	, country club membership			
	✓ No				
	Yes. Give specific				
	information				
	l.				
54. A	dd the dollar value of all	of your entries from Part 7. Wri	te that number here		<b>&gt;</b>
Part 8	List the Totals of	Each Part of this Form			
55 <b>F</b>	Part 1: Total real estate	line 2		•	
33.1	art i. iotal leal estate,	mie Z			
56. <b>r</b>	oart 2 total vehicles, line	5	Φ0.400 F0		
-			\$9492.50	<u> </u>	
57. <b>P</b>	art 3: Total personal and	d household items, line 15	\$550.00	<u> </u>	
58. <b>P</b>	art 4: Total financial ass	ets, line 36			
59. <b>F</b>	Part 5: Total business-re	lated property, line 45	·	<del></del>	
		shing-related property, line 52		<del></del>	
				<u> </u>	
61. <b>F</b>	Part 7: Total other prope	rty not listed, line 54			
62. <b>1</b>	otal personal property.	Add lines 56 through 61	\$10042.50		+ \$10042.50
			+ 100 12.00	Copy personal property total	
					¢10040 50
63 <b>T</b>	otal of all property on Sc	:hedule A/B. Add line 55 + line 62	)		\$10042.50
JJ. 1	proporty on ot				i

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			Docu	ment Page 20	of 82	
Fill in	this inform	mation to identify your case	:			
Debto	or 1	Carlos First Name	L. Middle Name	Cochran Last Name	_	
Debto (Spous	or 2 se, if filing)	First Name	Middle Name	Last Name	_	
Unite	d States B	ankruptcy Court for the: No	orthern D	istrict of Illinois (State)	_	
Case (If know	number vn)	-		, ,	_	_
Off	icial	Form 106C				Check if this is a amended filing
Sch	nedul	e C: The Proper	ty You Claim a	s Exempt		04/1
For e state the a tax-e unde your Part	ach iten a specif mount of exempt ra a law t exempti  I: Iden Which set	fic dollar amount as exe f any applicable statuto etirement funds—may	as exempt, you must sempt. Alternatively, you bry limit. Some exempt be unlimited in dollar and to a particular dollar the applicable statutor laim as Exempt iming? Check one only, everal nonbankruptcy exempt tions. 11 U.S.C. § 522(b)(2)	specify the amount of u may claim the full faitions—such as those furnount. However, if you amount and the value y amount.  The if your spouse is filling we stions. 11 U.S.C. § 522(b) (2)	ir market value of or health aids, right ou claim an exemple of the property is with you.	claim. One way of doing so is to the property being exempted up to its to receive certain benefits, and tion of 100% of fair market value determined to exceed that amount
		cription of the property and chedule A/B that lists this	Current value of the portion you own	Amount of the exemption  Check only one box for e	•	Specific laws that allow exemption
			Copy the value from Schedule A/B			
	Brief description Used Line from Schedule	Clothing	\$325.00	\$3 100% of fair marke applicable statutory		735 ILCS 5/12-1001(a)
	Brief		\$225.00			735 ILCS 5/12-1001(b)
	descriptior Cell p Line from Schedule	phone	φ223.00	\$2. 100% of fair marke applicable statutory		_
		laiming a homestead exem o adjustment on 4/01/19 and			ate of adjustment.)	

No Yes

Yes. Did you acquire the property covered by the exemption within 1,215 days before you filed this case?

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Debtor	1 Carlos First Name	L. Middle Name	Cochran Last Name	Case number (if known)	
Part 2:	Additional Page				
lin	ief description of the property a e on Schedule A/B that lists this operty		Check only one	exemption you claim box for each exemption.	Specific laws that allow exemption
Lin	cefescription:  Checking account, Go Bank  Deferom  Checkle A/B:  17	\$0.00		\$0 ir market value, up to any statutory limit	735 ILCS 5/12-1001(b)
Lin	ef scription:  Hyundai Elantra, 2017, 2017 Hyundai Elantra ne from thedule A/B:  03	\$9,492.50		\$0 ir market value, up to any statutory limit	735 ILCS 5/12-1001(c); 735 ILCS 5/12-1001(b)

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		Do	current 1 age 22 or	02		
Fill in this info	rmation to identify your ca	se:				
Debtor 1	Carlos	L.	Cochran			
	First Name	Middle Name	Last Name			
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name			
Linitari Otataa						
United States i	Bankruptcy Court for the:	Nortnern	District of Illinois(State)			
Case number (If known)						
Official	Form 106D					Check if this is a mended filing
	·	ors Who Ha	ve Claims Secure	ed by Prop		12/1
Be as complet	te and accurate as possib	le. If two married peopl	e are filing together, both are equ	ally responsible for s	upplying correct info	mation. If
•	needed, copy the Addition number (if known).	onal Page, fill it out, nur	nber the entries, and attach it to t	his form. On the top	of any additional pag	es, write your
	e number (il known). creditors have claims se	actired by your proper	hu?			
			<b>vith your other schedules. You hav</b>	ve nothing else to ren	ort on this form	
<b>=</b>	Fill in all of the information		Will your outer seriedales. Tournay	re nouning cise to rep	ort ort this forth.	
		i below.				
Part 1: List	All Secured Claims					
	secured claims. If a credit			Column A	Column B	Column C
· ·	•	•	ticular claim, list the other creditors order according to the creditor's	Amount of claim Do not deduct the	Value of collateral	Unsecured
name.				value of collateral.	that supports this claim	If any
2.1 GM Fin		Describe the property	that secures the claim:	\$21,920.00	\$18,985.00	\$2,935.00
Creditor's		2017 Hyundai Elantra				
Numi			, the claim is: Check all that apply.			
		Contingent				
Arlingt	on TX 76096	Unliquidated				
City Who ov	State ZIP Code wes the debt? Check one.	Disputed				
	btor 1 only	Nature of lien. Check a	all that apply.			
Del	btor 2 only	An agreement you car loan)	made (such as mortgage or secured			
	btor 1 and Debtor 2 only		as tax lien, mechanic's lien)			
	least one of the debtors	Judgment lien from	,			
Ch	eck if this claim relates a community debt	Other (including a ri				
	ebt was 3/2016	Last 4 digits of accou	nt number5876			

Add the dollar value of your entries in Column A on this page. Write that number

here:

\$21,920.00

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Fill in	this infor	mation to identify your c	ase:					
Debto	r 1	Carlos	L.	Cochran				
Dalata	0	First Name	Middle Name	Last Name				
Debto (Spous	e, if filing)	First Name	Middle Name	Last Name				
United	d States E	Bankruptcy Court for the:	Northern	District of Illinois (State)				
Case (If know	number <sup>m)</sup>	-		(State)				
Offic	cial F	orm 106E/F			1	Chec	k if this is an	amended filing
Scl	hedu	ule E/F: Cre	editors Who	Have Unsecure	d Claims			12/1
other programmer of the enth known	party to a 106A/B) a that are tries in the list.	any executory contracts and on Schedule G: Exe e listed in Schedule D: C	s or unexpired leases the cutory Contracts and United to Creditors Who Hold Claitach the Continuation of Unsecured Claims		executory contracts G). Do not include a ce is needed, copy	s on <i>Schedu</i> any creditors the Part you	<i>le A/B: Prop</i> s with partia u need, fill it	erty (Official Ily secured t out, number
[	_	Go to Part 2.						
2. L	isted, ide As much Continuat	ntify what type of claim it as possible, list the claims tion Page of Part 1. If mor	is. If a claim has both pri s in alphabetical order acc re than one creditor holds	s more than one priority unsecured clair ority and nonpriority amounts, list that ording to the creditor's name. If you ha a particular claim, list the other creditor as for this form in the instruction bookle	claim here and show ave more than two pr s in Part 3.	both priority	and nonprior	ity amounts.
						claim	amount	amount
2.1	Priority (Po Box Number  Minnear City Who inc Deb Deb At le	Street  Street  Soolis  Minnesota State  Curred the debt? Check  Stor 1 only  Stor 2 only  Stor 1 and Debtor 2 only  Seast one of the debtors and  Seck if this claim relates  Laim subject to offset?	Zip Code one. nd another	Last 4 digits of account number	n: u owe the ry while you were	\$200.00	\$200.00	\$0.00
2.2	IRS 1 Priority C PO Box Number Philadelp	Street	nia 19101	Last 4 digits of account number	n/a	\$293.00	\$293.00	\$0.00
	Deb Deb At le	State curred the debt? Check of the country of the	nd another	Unliquidated Disputed  Type of PRIORITY unsecured claim Domestic support obligations  Taxes and certain other debts yo government Claims for death or personal injuintoxicated Other. Specify	u owe the			

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Part 2: List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. ◪ Yes. List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of Part 2. **Total claim** 4.1 Bedford Park Police Department Photo Enforcement Program \$200.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO BOX 742503 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 45274 Cincinnati Ohio Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? No Yes Beverly Park Medical Center \$5,000.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 11012 S Western Ave Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago 60643 Illinois Disputed City State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another Check if this claim relates to a community debt Other. Specify Unpaid Medical Bills Is the claim subject to offset? **✓** No Yes Capital One \$480.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? Po Box 30285 n/a Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 84130 Salt Lake Cty Utah City Zip Code Disputed State Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only  $\overline{}$ Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ **Unpaid Credit Card** Is the claim subject to offset? Official Yes 106E/F Schedule E/F: Creditors Who Have Unsecured Claims page 2

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** City of Chicago - Parking and red Light Tickets 4.4 \$1,723.00 Last 4 digits of account number Nonpriority Creditor's Name Department of Revenue - PO Box 88292 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60680 Chicago Illinois City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ **Unpaid Tickets** Is the claim subject to offset? No Yes ComEd \$1,306.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 3 Lincoln Center Street As of the date you file, the claim is: Check all that apply. Bankruptcy Section Contingent Unliquidated Oakbrook Terrace Illinois 60181 City Disputed Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Other V Is the claim subject to offset? **✓** No Yes Cook County Hospital \$2.500.00 4.6 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 25706 Network Place Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60673 Chicago City Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Unpaid Medical Bills Other. Specify Is the claim subject to offset?

✓ No Yes

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 Country Club Hills Municipality \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 4200 W 183rd Street Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60478 Country Club Hills Illinois State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Unpaid ticket ✓ Is the claim subject to offset? No ☐ Yes CREDIT COLLECTION SERV \$248.00 9126 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2017 725 CANTON ST Street Number As of the date you file, the claim is: Check all that apply. Contingent NORWOOD Massachusetts 02062 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one.  $\overline{}$ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: COMCAST **✓** No Other. Specify **CABLE** Yes **DIVERSIFIED CONSULTANT** \$429.00 Last 4 digits of account number 6625 Nonpriority Creditor's Name When was the debt incurred? 10550 DEERWOOD PARK BLVD 11/2016 Number Street As of the date you file, the claim is: Check all that apply. Contingent **JACKSONVILLE** 32256 Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or At least one of the debtors and another divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts 001 Collection; Collecting for Is the claim subject to offset? **V** ORIGINAL CREDITOR: AT T

**✓** No

Other. Specify

**WIRELESS** 

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.10 Federal Loan Serivce \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 9/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 17016 Cornwall Pennsylvania Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.11 Federal Loan Serivce \$0.00 0006 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 9/2013 Number As of the date you file, the claim is: Check all that apply. Contingent Cornwall Pennsylvania 17016 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.12 Federal Loan Serivce \$0.00 Last 4 digits of account number 0005 Nonpriority Creditor's Name When was the debt incurred? 9/2013 P.O. Box 60610 Number As of the date you file, the claim is: Check all that apply. Contingent 17016 Pennsylvania Cornwall Unliquidated State Zip Code City Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.13 Federal Loan Serivce \$0.00 Last 4 digits of account number Nonpriority Creditor's Name P.O. Box 60610 When was the debt incurred? 9/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent 17016 Cornwall Pennsylvania Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.14 Federal Loan Service \$7,320.00 0004 Last 4 digits of account number Nonpriority Creditor's Name 400 Maryland Ave SW When was the debt incurred? 9/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent Washington District of Columbia 20202 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.15 Federal Loan Service. \$4,860.00 Last 4 digits of account number 0006 Nonpriority Creditor's Name When was the debt incurred? 9/2013 400 Maryland Ave SW Number As of the date you file, the claim is: Check all that apply. Contingent District of Columbia 20202 Washington Unliquidated State Zip Code City Disputed Who incurred the debt? Check one Debtor 1 only ◪ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? No

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.16 Federal Loan Service. \$4,754.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 9/2013 400 Maryland Ave SW Number Street As of the date you file, the claim is: Check all that apply. Contingent District of Columbia 20202 Washington Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Is the claim subject to offset? **✓** No Yes 4.17 Federal Loan Service \$3,674.00 0003 Last 4 digits of account number Nonpriority Creditor's Name 400 Maryland Ave SW When was the debt incurred? 9/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent Washington District of Columbia 20202 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only ✓ Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt debts Other. Specify Is the claim subject to offset? **✓** No Yes 4.18 IL Tollway \$300.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2700 Ogden Ave n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60515 Downers Grove City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims Debts to pension or profit-sharing plans, and other similar At least one of the debtors and another debts Check if this claim relates to a community debt Other. Specify **Unpaid Tolls** Is the claim subject to offset? **✓** No

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.19 \$44.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a PO Box 7346 Street Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 19101 <u>Philadel</u>phia Pennsylvania City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? No ◪ ☐ Yes MIDSTATE COLLECTION SO \$3,338.00 Last 4 digits of account number \_ 5020 Nonpriority Creditor's Name When was the debt incurred? 1/2015 2009B Round Barn Rd As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Champaign Illinois 61821 Disputed State Zip Code Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for ✓ ORIGINAL CREDITOR: PRAIRIE Is the claim subject to offset? Other. Specify STATE COLLEGE **✓** No Yes Nicor Gas 4.21 \$914.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? PO Box 0632 Number As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Illinois 60507 Aurora City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify Other Is the claim subject to offset? **V** No

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** Old Second National Bank 4.22 \$238.00 - Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 37 S River street Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 60506 Illinois Aurora City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? No Yes Peoples Gas \$0.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? n/a 200 E. Randolph As of the date you file, the claim is: Check all that apply. Contingent Unliquidated Chicago Illinois 60601 Disputed State Zip Code Who incurred the debt? Check one Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify Notice only Is the claim subject to offset? **✓** No Yes PORTFOLIO RC \$409.00 4.24 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 2/2017 120 Corporate Boulevard Number As of the date you file, the claim is: Check all that apply. Contingent Norfolk 23502 Virginia Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt 001 Collection; Collecting for Is the claim subject to offset? **|** • | **ORIGINAL CREDITOR: 08** No Other. Specify CAPITAL ONE BANK USA N A

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Debtor 1 Carlos Cochran Case number (if known) First Name Last Name Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** PORTFOLIO RECOV ASSOC 4.25 \$409.00 Last 4 digits of account number Nonpriority Creditor's Name 120 CORPORATE BLVD STE When was the debt incurred? 2/2017 Number Street As of the date you file, the claim is: Check all that apply. Contingent **NORFOLK** 23502 Virginia Unliquidated State Zip Code City Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar Check if this claim relates to a community debt Other. Specify 001 UnknownLoanType Is the claim subject to offset? **✓** No Yes 4.26 Spangler Jennings & Dougherty \$0.00 Last 4 digits of account number Nonpriority Creditor's Name 8396 Mississippi St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 46410 Merrillville Indiana Citv State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Notice Only Is the claim subject to offset? **✓** No Yes 4.27 TCF \$100.00 Last 4 digits of account number Nonpriority Creditor's Name When was the debt incurred? 1405 XENIUM LN N STE 180 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated 55441 Minneapolis Minnesota City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or Debtor 1 and Debtor 2 only divorce that you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify \_ Other Is the claim subject to offset? No

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Debtor	1 Carlos L.	Cochran	Case number (if known)	
	First Name Middle	Name Last Name		
Part 2:	Your NONPRIORITY Unsecured	d Claims - Continuation	Page	
	After listing any entries on this page,	number them beginning wi	th 4.5, followed by 4.6, and so forth.	Total claim
	The Law Offices of Dworkin and Maciarie Nonpriority Creditor's Name	ello	Last 4 digits of account number	\$0.00
	134 N LaSalle Dr #650		When was the debt incurred?n/a	
	Number Street		As of the date you file, the claim is: Check all that apply.	
			Contingent	
	Chicago Illinois	60602	Unliquidated	
	City State	Zip Code	Disputed	
	Who incurred the debt? Check one.  Debtor 1 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 only  Debtor 2 only		Student loans	
	<u>'</u>		Obligations arising out of a separation agreement or	
	Debtor 1 and Debtor 2 only  At least one of the debtors and anot	her	divorce that you did not report as priority claims  Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a co		debts	
	Is the claim subject to offset?	ommunity debt	Other. Specify Notice Only	
	No			
	Yes			
4.29	UNITED RESOURCE SYSTEM		Look 4 dissite of consumt numbers 40NH	\$592.00
	Nonpriority Creditor's Name		Last 4 digits of account number 42N1  When was the debt incurred? 7/2015	
	3501 S TELLER ST Number Street			
			As of the date you file, the claim is: Check all that apply.	
	LAKEWOOD Colorado	80235	Contingent	
	City State	Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and anot	hor	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	브		Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a collist the claim subject to offset?	ommunity debt	debts  001 Collection; Collecting for	
	No		ORIGINAL CREDITOR: US	
	Yes		Other. Specify XPRESS CD	
4.30	UNITED RESOURCE SYSTEM			\$327.00
4.00	Nonpriority Creditor's Name		Last 4 digits of account number 68N1	Ψ021.00
	3501 S TELLER ST Number Street		When was the debt incurred? 3/2015	
			As of the date you file, the claim is: Check all that apply.	
	LAKEWOOD Colorado	80235	Contingent	
	City State	Zip Code	Unliquidated	
	Who incurred the debt? Check one.  Debtor 1 only		Disputed	
	Debtor 2 only		Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only		Student loans	
	At least one of the debtors and anot	her	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	片		Debts to pension or profit-sharing plans, and other similar	
	Check if this claim relates to a collist the claim subject to offset?	ommunity uest	debts  001 Collection; Collecting for	
	No		Other Specify XPRESS CD	

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	Carlos First Name		L. Middle Name	Cochran Last Name	Case nu	mber (if known)
rt 3:	List Others to B	e Notified	About a Debt That Yo	u Already Listed		
colle	ection agency is to ection agency her	rying to colle e. Similarly, i	ct from you for a debt your for a debt you for a debt you have more than on	ou owe to someone ne creditor for any o	else, list the ori of the debts that	already listed in Parts 1 or 2. For example, if a ginal creditor in Parts 1 or 2, then list the you listed in Parts 1 or 2, list the additional 2, do not fill out or submit this page.
Harr	ris, Arnold e			On which entry i	n Part 1 or Part	2 did you list the original creditor?
	West Jackson B nber Street			Line 4.4	of (Check one):	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Chic City	cago	Illinois State	60604 Zip Code	Last 4 digits of a	ccount number	
IL S	Secretary of State			On which entry i	n Part 1 or Part	2 did you list the original creditor?
270 Nun	11 S. Dirksen Parkwa nber Street	ay		Line 4.4	_of <i>(Check one):</i>	Part 1: Creditors with Priority Unsecured Claims  Part 2: Creditors with Nonpriority Unsecured Claims
Spri	ngfield	Illinois State	62723 Zip Code	Last 4 digits of a	ccount number	

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Debtor 1 Carlos L. Cochran Case number (if known)
First Name Middle Name Last Name

#### Add the Amounts for Each Type of Unsecured Claim Part 4: 6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim. **Total claims** \$0.00 **Total claims** 6a. Domestic support obligations. from Part 1 \$493.00 6b. Taxes and certain other debts you owe the government \$0.00 6c. Claims for death or personal injury while you were intoxicated \$0.00 6d. Other. Add all other priority unsecured claims. Write that amount here. \$493.00 6e. Total. Add lines 6a through 6d. 6e. **Total claims** \$20,608.00 **Total claims** 6f. Student loans from Part 2 \$0.00 6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims \$0.00 6h. Debts to pension or profit-sharing plans, and other similar \$18,657.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount here. \$39,265.00 6j. Total. Add lines 6f through 6i. 6j.

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First Name Middle Name Last Name  Debtor 2 (Spouse, if filing) First Name Middle Name Last Name
(Spouse, if filing) First Namo Middle Name Last Name
1 list Name Widdle Name Last Name
United States Bankruptcy Court for the: Northern District of Illinois
(State

#### Official Form 106G

#### Check if this is an amended filing

#### Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
  - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
- Yes. Fill in all of the information below even if the contracts or leases are listed on Schedule A/B: Property (Official Form 106A/B).
- 2. List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

Person or company with whom you have the contract or lease

State what the contract or lease is for

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			Do	cument Page 3	37 of 82	
Fill in	this infor	mation to identify your	case:			
Debto	or 1	Carlos	L.	Cochran		
<b>5</b>		First Name	Middle Name	Last Name		
Debto (Spous	or 2 e, if filing)	First Name	Middle Name	Last Name		
United	d States E	ankruptcy Court for the:	Northern	District of Illinois (State)		
	number			(State)		
(If know	vn)				Check if this is	s an
					amended filing	
Off	icial	Form 106H				
Sch	edul	e H: Your Co	debtors		12	/15
				ots vou may have. Be as co	omplete and accurate as possible. If two married people are	
filing t	ogether,	both are equally response	nsible for supplying corre	ct information. If more space	ace is needed, copy the Additional Page, fill it out, and numbe	r
		ne boxes on the left. A r every question.	ttach the Additional Page	to this page. On the top of	of any Additional Pages, write your name and case number (if	
1.	Do vou	have any codebtors? (I	f vou are filing a joint case, d	o not list either spouse as a c	a codebtor.)	
	☐ No	,	. you are iming a joint oace, c	o not not ourse operate as a c		
	<b>✓</b> Ye	s				
2.					(Community property states and territories include Arizona,	
		a, Idano, Louisiana, Nevi o. Go to line 3.	ada, New Mexico, Puerto Ric	o, Texas, Washington, and V	wisconsin.)	
			mer spouse, or legal equiv	alent live with you at the tim	ime?	
		No		-		
		Yes. In which commu	unity state or territory did y	ou live?	Fill in the name and current address of that person.	
		Name of your analysis	former analyse or legal equi	volont	<u> </u>	
		name of your spouse,	former spouse, or legal equi	valent		
		Number Street				
		City	State	Zip Code		
3.	In Colur	nn 1, list all of your co	debtors. Do not include yo	ur spouse as a codebtor if	f your spouse is filing with you. List the person shown in line 2	
	-	_		have listed the creditor on <i>Schedule D</i> (Official Form 106D), edule <i>D</i> , <i>Schedule E/F</i> , or <i>Schedule G</i> to fill out Column 2.		
	Column	1: Your codebtor			Column 2: The creditor to whom you owe the debt	
					Check all schedules that apply:	
3.1	Cochran	, Carolyn			D Och of the D for the	
	Name	, - ,			Schedule D, line 2.1	
		615 Academy Ave			Schedule E/F, line	

60443

Zip Code

Schedule G, line

Number

Matteson

City

Street

Illinois

State

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			_			9			
Fill i	n this inf	ormation to identify	your case:						
Deb	tor 1	Carlos	L.	Cochr	an				
		First Name	Middle Name	Last N		)	- Che	eck if this is:	
	tor 2	E	N. C. I. II. N. I.				_	An amended filing	
(Spot	ise, it tiling)	First Name	Middle Name	Last N	lame	)	- 1 님	•	utition aboutou 1
-	ed States	Bankruptcy Court for	Northern	District of Illi				A supplement showing post-pe expenses as of the following da	
the:	e number			(8	State)	)		,	
(lf kn							_	MM / DD / YYYY	
Off	icial	Form 106I							
Sc	hedu	le I: Your In	come						12/1
spou num	se. If mo ber (if kn		l, attach a separate she y question.			_		not include information ab ional pages, write your nan	-
	-	r employment		Debtor 1				Debtor 2	
	informatio	on.	Employment status	- Emplo	wad				
	-	e more than one job, parate page with	Zimproymont otatao	Emplo	-	vod		Employed  Not Employed	
		n about additional		LINOUL	прю	yeu		Not Employed	
	employers.	-	Occupation	Forklift Dri	ver			_	
	Include pa self-emplo	rt time, seasonal, or	Employer's name	Meijer					
	·		Employer's address	РО ВОХ 9	600	15			
	•	n may include student aker, if it applies.		Number St	Number Street			Number Street	
				Orlando		Florida	32896	_	
				City		State	Zip Code	City State	Zip Code
			How long employed there?	5 months					
Par	t 2: Giv	re Details About N	Monthly Income						
				<b>n.</b> If you have	noth	ning to repo	ort for any line, v	write \$0 in the space. Include y	our non-filing
		s you are separated.	o moro than one ompleyer	combine the	infor	mation for	all ampleyare fo	or that person on the lines below	w If you pood
		attach a separate she		combine the	iriior	mation for	ali employers id	or that person on the lines below	v. II you need
						For I	Debtor 1	For Debtor 2 or non-filing spouse	
2.			ary, and commissions (befo , calculate what the monthly		2.		\$1,497.17	non-ming spouse	
3.	Estimate	e and list monthly ove	rtime pay.		3.		+ \$0.00		
4.	Calcula	te gross income. Add li	ine 2 + line 3.		4.		\$1,497.17		

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Dept	or 1Carlos First Name		Jochran Last Name	Case numbe	r <i>(if</i>	
	riist Name	Middle Name	Last Name	For Debtor 1	For Debtor 2 or non-filing spouse	
Co	py line 4 here		<b>→</b> 4.	\$1,497.17		
5. <b>Lis</b>	st all payroll ded					
5a	a. Tax, Medicare,	and Social Security deductions	5a.	\$315.42		
5b	. Mandatory cor	ntributions for retirement plans	5b.	\$0.00		
50	. Voluntary cont	ributions for retirement plans	5c.	\$0.00		
50	d. Required repa	yments of retirement fund loans	5d.	\$0.00		
5e	e. Insurance		5e.	\$0.00		
5f.	. Domestic supp	ort obligations	5f.	\$0.00		
50	g. Union dues		5g.	\$0.00		
5h	n. Other deduction	ons. Specify:	_ 5h. +	\$0.00 +		
6. <b>Ad</b> +5h.	d the payroll ded	<b>ductions.</b> Add lines 5a + 5b + 5c + 5d + 5e +5f	f + 5g 6.	\$315.42		
7. <b>Ca</b>	lculate total mo	nthly take-home pay. Subtract line 6 from line	4. 7.	\$1,181.74		
8. <b>Lis</b>	st all other incon	ne regularly received:				
8a	business, profe	m rental property and from operating a ession, or farm ent for each property and business showing				
	gross receipts, o	ordinary and necessary business expenses, and	0	\$0.00		
g.h	the total monthl b. <b>Interest and di</b>	•	8a. 8b.	\$0.00		
		payments that you, a non-filing spouse, or		φυ.υυ		
	Include alimony	, spousal support, child support, maintenance, ent, and property settlement.	8c.	\$0.00		
80	d. Unemployment		8d.	\$0.00		
8e	. Social Security	,	8e.	\$0.00		
8f.	Include cash ass cash assistance	ent assistance that you regularly receive sistance and the value (if known) of any non-that you receive, such as food stamps (benefits emental Nutrition Assistance Program) or es				
			8f.	\$0.00		
	g. Pension or ret		8g.	\$0.00		
_ <u>E</u> :	st. Prorated Incon		8h. +	<u>\$130.00</u> +		
9. <b>Ad</b>	d all other incon	ne Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g +	- 8h. 9.	\$130.00		
		r <b>income.</b> Add line 7 + line 9. ne 10 for Debtor 1 and Debtor 2 or non-filing sp	10. pouse	\$1,311.74	=	\$1,311.74
In frie	clude contribution ends or relatives.	gular contributions to the expenses that you is from an unmarried partner, members of your amounts already included in lines 2-10 or amou	household, your o	ependents, your roomr		
	pecify:	,		.,.	11.	+ \$0.00
		n the last column of line 10 to the amount in n the <i>Summary of Schedules and Statistical Sui</i>				\$1,311.74
						Combined monthly income
13. <b>D</b>	No.	increase or decrease within the year after y	you file this form?	•		
	Yes. Explain:					

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		Dut	currient Page 40 0i	· 0∠		
Fill in this infor	mation to identify your c	ase:				
Debtor 1	Carlos	L.	Cochran			
Debtor 2	First Name	Middle Name	Last Name	Check if this is:		
(Spouse, if filing)	First Name	Middle Name	Last Name	An amended filin	g	
United States E	Sankruptcy Court for the:	Northern	District of Illinois (State)		owing post-petition	•
Case number (If known)			(Otato)	MM / DD / YYYY		
Official	Form 106J			_		
	e J: Your Exp	enses				12/15
information. If (if known). Ans	-	attach another sheet to th	e are filing together, both are ec his form. On the top of any addit			mber
1. Is this a joi	nt case?					
✓ No. Go	to line 2					
	oes Debtor 2 live in a se	eparate household?				
	No					
-	┛ Yes. Debtor 2 must fil	e Official Forms 106J-2, <i>Ex</i>	penses for Separate Household of	Debtor 2.		
2. Do vou hav	⊒ e dependents? 🕡 №		<u> </u>			
Do not list D	ebtor 1 and Ye	es. Fill out this information fo ach dependent	Dependent's relationship to Debtor 1 or Debtor 2	o Dependent's age	Does depender with you?	nt live
	penses include	0				
than	r people sinte.					
yourself and dependents	_	75				
Part 2: Estin	mate Your Ongoing I	Monthly Expenses				
-	of a date after the bank		s you are using this form as a su supplemental Schedule J, check		-	he
	-	eash government assistand t on Schedule I: Your Incor	ce if you know the value of me (Official Form B 106I.)		You	r expenses
	or home ownership ex	penses for your residence.	. Include first mortgage payments	and	4.	\$0.00
	uded in line 4:				••	
4a. Real es	state taxes				4a	\$0.00

\$0.00

\$0.00

\$0.00

4b.

4c.

4d.

4b. Property, homeowner's, or renter's insurance

4c. Home maintenance, repair, and upkeep expenses

4d. Homeowner's association or condominium dues

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Debtor 1 Carlos L. Cochran Case number (if known)
First Name Middle Name Last Name

5. Additional mortgage payments for your residence, such as home equity loans         5.         \$0.00           6. Utilities:         6.         \$0.00           6. Utilities:         6.         \$0.00           6. Otter, sever, garbage collection         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         6.         \$0.00           6. C. Telephone, cell phone, Internet, satellite, and cable services         \$0.00         \$0.00           7. Food and housekeeping supplies         \$0.00         \$0.00         \$0.00           10. Clothing, Isuardow         \$0.00         \$0.00         \$0.00           11. Medical and dental services         \$0.00         \$0.00           <	First Name	Middle Name Last Name		
6. Ullities         6				Your expenses
6a. Electricity, heat, natural gas         6a.         \$0.00           6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, statellite, and cable services         6c.         \$65.00           6d. Other, Specify:         6d.         \$60.00           7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$31.00           10. Personal care products and services         10.         \$15.50           11. Medical and dential expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$125.00           Do not include car payments         13.         \$0.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance.         15a. Life insurance         15a.         \$0.00           15b. Health insurance         15a. Life insurance         15a.         \$0.00           15c. Life insurance.         15c.         \$0.00           15c. Vahicle insurance. Specify:         15a.         \$0.00           15c. Life insurance.         15c.         \$0.00	5. Additional mortgage payme	ents for your residence, such as home equity loans	5.	\$0.00
6b. Water, sewer, garbage collection         6b.         \$0.00           6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$85.00           8d. Other. Specify:         7c.         \$200.00           7c. Food and housekeeping supplies         7c.         \$200.00           8c. Childcare and children's education costs         8c.         \$0.00           9c. Olthing, Iaundry, and dry cleaning         9c.         \$31.00           10. Personal care products and services         11c.         \$0.00           11. Medical and dental expenses         11c.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12c.         \$125.00           10. not include acre payments         13.         \$0.00           14. Charitable contributions and religious donations         13.         \$0.00           15. Insurance         15a.         \$0.00           15a. Lie insurance deducted from your pay or included in lines 4 or 20.         15a.         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         15a         \$0.00           15c. Vehicle insurance         \$0.00         \$0.00           15c. Vehicle insurance         \$0.00         \$0.00           15c.	6. Utilities:			·
6c. Telephone, cell phone, Internet, satellite, and cable services         6c.         \$65.00           6c. Other, Specify:         6d.         \$0.00           7. Food and housekeeping supplies         7.         \$200.00           8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$31.00           10. Personal care products and services         10.         \$15.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare.         12.         \$152.00           15. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           16. Charitable contributions and religious donations         15.         \$0.00           15. Intertainment, clubs, recreation, newspapers, magazines, and books         15.         \$0.00           15. Leath insurance         15.         \$0.00           15. Leath insurance deducted from your pay or included in lines 4 or 20.         15.         \$0.00           15. Leath insurance         15.	6a. Electricity, heat, natural g	as	6a.	\$0.00
6d. Other. Specify  6d. Other. Specify  7.   6d.   8.0.00   7. Food and housekeeping supplies 7.   8200.00   8. Childcare and children's education costs 8.   8.0.00   9. Clothing, laundry, and dry cleaning 9.   6.   8.1.00   10. Personal care products and services 10.   11.   80.00   11. Medical and dental expenses 11.   80.00   12. Transportation, Include gas, maintenance, bus or train fare. 0D not include care payments 0.   12.   8125.00   13. Entertainment, clubs, recreation, newspapers, magazines, and books 12.   80.00   14. Charitable contributions and religious donations 15. Insurance.   15. Insurance   15.	6b. Water, sewer, garbage co	ollection	6b.	\$0.00
7. Food and housekeeping supplies         7.         \$200.00           8. Childran's and childran's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$31.00           10. Personal care products and services         10.         \$15.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation, Include gas, maintenance, bus or train fare.         12.         \$12.50           13. Entertainment, clubs, recreation, newspapers, magazines, and books         13.         \$0.00           14. Charitable contributions and religious donations         15.         \$0.00           15. Insurance.         15s         \$0.00           15. Insurance.         15s         \$0.00           15c. Vehicle insurance educated from your pay or included in lines 4 or 20.         15c         \$10.00           15c. Vehicle insurance. Specify:         15c         \$0.00           15c. Vehicle insurance. Specify:         15c         \$0.00 <td>6c. Telephone, cell phone, Ir</td> <td>nternet, satellite, and cable services</td> <td>6c.</td> <td>\$65.00</td>	6c. Telephone, cell phone, Ir	nternet, satellite, and cable services	6c.	\$65.00
8. Childcare and children's education costs         8.         \$0.00           9. Clothing, laundry, and dry cleaning         9.         \$31.00           10. Personal care products and services         10.         \$15.00           11. Medical and dental expenses         11.         \$0.00           12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments         12.         \$152.00           14. Charitable contributions and religious donations         14.         \$0.00           15. Insurance. Do not include linsurance deducted from your pay or included in lines 4 or 20.         15a. Life insurance         15a.         \$0.00           15a. Life insurance         15a.         \$0.00         \$0.00         \$0.00         \$0.00           15b. Health insurance         15a.         \$0.00	6d. Other. Specify:		6d	\$0.00
9. Clothing, laundry, and dry cleaning       9.       \$31.00         10. Personal care products and services       10.       \$15.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation, Include gas, maintenance, bus or train fare.       2.       \$12.00         10. Include car payments       12.       \$12.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       15.00       \$0.00         15. Insurance.       15a.       \$0.00         15b. Health insurance deducted from your pay or included in lines 4 or 20.       15b. Health insurance       15b.       \$0.00         15c. Vehicle insurance. Specify:       15d.       \$0.00       \$0.00         15c. Vehicle insurance.       15d.       \$0.00       \$0.00       \$0.00         17c. Clear. Specify:       17d.       \$0.00       \$0.00       \$0.00 </td <td>7. Food and housekeeping su</td> <td>pplies</td> <td>7.</td> <td>\$200.00</td>	7. Food and housekeeping su	pplies	7.	\$200.00
10. Personal care products and services       10.       \$15.00         11. Medical and dental expenses       11.       \$0.00         12. Transportation. Include gas, maintenance, bus or train fare. Do not include car payments       12.       \$125.00         13. Entertainment, clubs, recreation, newspapers, magazines, and books       13.       \$0.00         14. Charitable contributions and religious donations       14.       \$0.00         15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20.       15a       \$0.00         15b. Health insurance       15a       \$0.00         15c. Vehicle insurance       15c       \$125.00         15c. Vehicle insurance. Specify:       15c       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         15c. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         17b. Car payments for Vehicle 1       17c       \$0.00         17c. Other. Specify:       17c       \$0.00	8. Childcare and children's ed	ducation costs	8.	\$0.00
11. Medical and dental expenses	9. Clothing, laundry, and dry	cleaning	9.	\$31.00
12.   Transportation. Include gas, maintenance, bus or train fare. Do not include car payments   12.   \$125.00     13.   Entertainment, clubs, recreation, newspapers, magazines, and books   13.   \$0.00     14.   Charitable contributions and religious donations   14.   \$0.00     15.   Insurance.	10. Personal care products a	nd services	10.	\$15.00
Do not include car payments   13.	11. Medical and dental expen	nses	11.	\$0.00
14. Charitable contributions and religious donations	-		12.	\$125.00
15. Insurance.	13. Entertainment, clubs, rec	reation, newspapers, magazines, and books	13.	\$0.00
Do not include insurance deducted from your pay or included in lines 4 or 20.   15a. Life insurance   15a   \$0.00     15b. Health insurance   15b   \$0.00     15c. Vehicle insurance   15c   \$125.00     15c. Other insurance. Specify:	14. Charitable contributions a	and religious donations	14.	\$0.00
15b. Health insurance         15b         \$0.00           15c. Vehicle insurance         15c         \$125.00           15d. Other insurance. Specify:         15d         \$0.00           16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.         50.00         \$0.00           Specify:         16         \$0.00           17. Installment or lease payments:         17a         \$0.00           17b. Car payments for Vehicle 1         17a         \$0.00           17b. Car payments for Vehicle 2         17b         \$0.00           17c. Other. Specify:         17c         \$0.00           17d. Other. Specify:         17d         \$0.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18.           19. Other payments you make to support others who do not live with you.         18.           20cify:         19.         \$0.00           20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20a         \$0.00           20b. Real estate taxes.         20b         \$0.00           20c. Property, homeowner's, or renter's insurance         20c         \$0.00           20c. Property, homeowner's, or renter's insurance <td></td> <td>ducted from your pay or included in lines 4 or 20.</td> <td></td> <td></td>		ducted from your pay or included in lines 4 or 20.		
15c. Vehicle insurance       15c       \$125.00         15d. Other insurance. Specify:       15d       \$0.00         16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       Specify:       16       \$0.00         17. Installment or lease payments:       17. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       18.         Specify:       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	15a. Life insurance		15a	\$0.00
15d. Other insurance. Specify:	15b. Health insurance		15b	\$0.00
16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20.       \$0.00         Specify:       16         17. Installment or lease payments:       17a         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       \$0.00         Specify:       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	15c. Vehicle insurance		15c	\$125.00
Specify:         16           17. Installment or lease payments:         17a. Car payments for Vehicle 1         17a. So.00           17b. Car payments for Vehicle 2         17b. So.00           17c. Other. Specify:         17c. So.00           17d. Other. Specify:         17d. So.00           18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).         18.           19. Other payments you make to support others who do not live with you.         19. So.00           20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.         20a. Mortgages on other property           20a. Mortgages on other property         20a. So.00           20b. Real estate taxes.         20b. So.00           20c. Property, homeowner's, or renter's insurance         20c. So.00           20d. Maintenance, repair, and upkeep expenses.         20d. So.00	15d. Other insurance. Specif	fy:	<b>1</b> 5d	\$0.00
17. Installment or lease payments:       30.00         17a. Car payments for Vehicle 1       17a       \$0.00         17b. Car payments for Vehicle 2       17b       \$0.00         17c. Other. Specify:       17c       \$0.00         17d. Other. Specify:       17d       \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I).       18.         19. Other payments you make to support others who do not live with you.       19.       \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a       \$0.00         20b. Real estate taxes.       20b       \$0.00         20c. Property, homeowner's, or renter's insurance       20c       \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d       \$0.00	16. Taxes. Do not include taxes	s deducted from your pay or included in lines 4 or 20.		
17. Installment or lease payments:       17a. \$0.00         17a. Car payments for Vehicle 1       17a. \$0.00         17b. Car payments for Vehicle 2       17b. \$0.00         17c. Other. Specify:       17c. \$0.00         17d. Other. Specify:       17d. \$0.00         18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106l).       18.         19. Other payments you make to support others who do not live with you.       19. \$0.00         20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.       20a. \$0.00         20a. Mortgages on other property       20a. \$0.00         20b. Real estate taxes.       20b. \$0.00         20c. Property, homeowner's, or renter's insurance       20c. \$0.00         20d. Maintenance, repair, and upkeep expenses.       20d. \$0.00	Specify:		16	\$0.00
17b. Car payments for Vehicle 2 17c. Other. Specify: 17c. Other. Specify: 17d. So.00 18. Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 106I). 18.  19. Other payments you make to support others who do not live with you. Specify: 19. \$0.00 20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. Mortgages on other property 20b. Real estate taxes. 20b. \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. \$0.00	17. Installment or lease paym	nents:		
17c. Other. Specify:	17a. Car payments for Vehic	le 1	17a	\$0.00
17d. Other. Specify:	17b. Car payments for Vehic	cle 2	17b	\$0.00
17d. Other. Specify:	17c. Other. Specify:		17c	\$0.00
your pay on line 5, Schedule I, Your Income (Official Form 106I).  19.Other payments you make to support others who do not live with you.  Specify:  20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a \$0.00  20b. Real estate taxes.  20b \$0.00  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.			17d	\$0.00
19. Other payments you make to support others who do not live with you.  Specify:  20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property  20a. So.00  20b. Real estate taxes.  20c. Property, homeowner's, or renter's insurance  20d. Maintenance, repair, and upkeep expenses.  20d. So.00				\$0.00
Specify:		,	18.	
20. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.  20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20c. Maintenance, repair, and upkeep expenses. 20d \$0.00		to support others who do not live with you.	10	<b>#0.00</b>
20a. Mortgages on other property 20b. Real estate taxes. 20b \$0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d \$0.00		ses not included in lines 4 or 5 of this form or on Schedule I: Your Income	19.	\$0.00
20b. Real estate taxes.  20b. So.00 20c. Property, homeowner's, or renter's insurance 20c. So.00 20d. Maintenance, repair, and upkeep expenses. 20d. So.00			20a	\$0.00
20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses. 20d. So.00				
20d. Maintenance, repair, and upkeep expenses.  20d \$0.00	20c. Property, homeowner's	s, or renter's insurance		
	20d. Maintenance, repair, an	d upkeep expenses.		
	20e. Homeowner's associati	ion or condominium dues		

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Debtor 1			L.	Cochran	Case number (if known)		
	First Na	ıme	Middle Name	Last Name			
21. <b>Othe</b>	r. Speci	ify:				21	\$0.00
oo Colo	uloto v	our monthly expenses.					
	-						\$561.00
		es 4 through 21.	(- D-b0) '(	( Official Farm 400 L0			\$0.00
		ne 22 (monthly expenses		\$561.00			
		e 22a and 22b. The resul	22.				
	-	our monthly net incom					
23a. (	Copy lin	ne 12 (your combined m	onthly income) from	Schedule I.		23a	\$1,311.74
23b.	Сору ус	our monthly expenses fro	om line 22 above.			23b	\$561.00
		t your monthly expenses		ncome.			\$750.74
	The res	ult is your monthly net in	ncome.			23c	
nom				loan within the year or do y modification to the terms o			
_	Explain here:  Debtor lives with his mom and does not pay for rent or utility bills.						

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Fill in this information to identify your case:									
Debtor 1	Carlos	L.	Cochran						
	First Name	Middle Name	Last Name						
Debtor 2									
(Spouse, if filing)	First Name	Middle Name	Last Name						
United States Bankruptcy Court for the:		Northern	District of Illinois						
Case number (If known)			(State)	_					

#### Official Form 106Dec

### Check if this is an amended filing

#### **Declaration About an Individual Debtor's Schedules**

12/15

If two married people are filing together, both are equally responsible for supplying correct information.

You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Pai	t 1: Sign Below								
Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms?									
	✓ No								
	Yes. Name of person	Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).							
	Hadan and the second to the second the secon	and askedulas filed with this declaration and							
	Under penalty of perjury, I declare that I have read the summary that they are true and correct.	and schedules filed with this declaration and							
×	/s/ Carlos Cochran	×							
	Signature of Debtor 1	Signature of Debtor 2							
	Date 6/28/2018	Date							
	MM/DD/YYYY	MM/DD/YYYY							

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Fill in	this infor	mation to identify your c	ase:					
Debto	or 1	Carlos First Name	L. Middle I	Cochran Name Last Nam	e			
Debto (Spous	or 2 se, if filing)	First Name	Middle I	Name Last Nam	e			
Unite	d States E	Bankruptcy Court for the:	Northern	District of Illino	is			
Case (If know	number wn)			(Stat	e)			
Off	icial	Form 107						Check if this is a amended filing
Sta	teme	nt of Financia	l Affairs f	or Individuals	Filing for	Bankru	ptcy	04/1
inforr	nation. I		ed, attach a sep	arried people are filing arate sheet to this form				
Part	1: Give	e Details About Your	Marital Status	and Where You Lived	Before			
1.	What is	your current marital sta	atus?					
		rried t married						
2.	During t	the last 3 years, have yo	ou lived anywhere	e other than where you liv	ve now?			
	✓ No Yes	s. List all of the places yo	ou lived in the las	t 3 years. Do not include v	where you live r	OW.		
	Del	otor 1:		Dates Debtor 1 lived there	Debtor 2:			Dates Debtor 2 lived there
					Same as	Debtor 1		Same as Debtor 1
	Nur	mber Street		From To	Number Stre	et		From To
	City	y State	Zip Code		City	State	Zip Code	
		- Ciaio				Debtor 1		Same as Debtor 1
	Nur	mber Street		From	Number Stre	et		From To
	City	/ State	Zip Code		City	State	Zip Code	
á	and territo No	<i>ries</i> include Arizona, Califo	omia, Idaho, Louis	oouse or legal equivalent siana, Nevada, New Mexico, Codebtors (Official Form	Puerto Rico, Te			

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Ebtor 1 Carlos L. First Name Midd	le Name Last N		umber (if known)	
rt 2: Explain the Sources of Your In	come			
Did you have any income from employn Fill in the total amount of income you rece activities. If you are filing a joint case and y  No  Yes. Fill in the details.	nent or from operating a bived from all jobs and all bu	sinesses, including part-time	•	years?
_	Debtor 1		Debtor 2	
	Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:	Wages, commissions, bonuses, tips Operating a business	\$7002.00	Wages, commissions, bonuses, tips Operating a business	
For last calendar year: (January 1 to December 31, 2017 )  YYYY	Wages, commissions, bonuses, tips Operating a business	\$23000.00	Wages, commissions, bonuses, tips Operating a business	
For the calendar year before that: (January 1 to December 31, 2016)  YYYYY	Wages, commissions, bonuses, tips Operating a business	\$23000.00	Wages, commissions, bonuses, tips Operating a business	
Did you receive any other income during Include income regardless of whether that in public benefit payments; pensions; rental in filling a joint case and you have income that List each source and the gross income from V	ncome is taxable. Examples ncome; interest; dividends; it t you received together, list	s of other income are alimony; money collected from lawsuits; it only once under Debtor 1.	royalties; and gambling and	
	Debtor 1		Debtor 2	
	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)
From January 1 of current year until the date you filed for bankruptcy:				
For last calendar year: (January 1 to December 31, 2017 )  YYYY				
For the calendar year before that: (January 1 to December 31, 2016)  YYYY				

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Cochran Debtor 1 Carlos Case number (if known) Last Name Part 3: List Certain Payments You Made Before You Filed for Bankruptcy 6. Are either Debtor 1's or Debtor 2's debts primarily consumer debts? No. Neither Debtor 1 nor Debtor 2 has primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$6,425\* or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$6,425\* or more in one or more payments and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. \* Subject to adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment. Yes. Debtor 1 or Debtor 2 or both have primarily consumer debts. During the 90 days before you filed for bankruptcy, did you pay any creditor a total of \$600 or more? No. Go to line 7. Yes. List below each creditor to whom you paid a total of \$600 or more and the total amount you paid that creditor. Do not include payments for domestic support obligations, such as child support and alimony. Also, do not include payments to an attorney for this bankruptcy case. Amount you still owe Was this payment Dates of payment Total amount paid for Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Zip Code Suppliers or vendors Other Mortgage Creditor's Name Number Street Credit card Loan repayment Citv Suppliers or State 7in Code vendors Other Mortgage Creditor's Name Car Number Street Credit card Loan repayment City State Suppliers or Zip Code vendors

Other

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tor 1 Carlos		L.	Cod	hran	Case number	(if known)
First Name		Middle Name	Last	Name		
Insiders include your corporations of which	relatives; an n you are an for a busine	ny general partners n officer, director, p ess you operate as	s; relatives of any g person in control,	jeneral partners; part or owner of 20% or	nerships of which y more of their voting	who was an insider? You are a general partner; g securities; and any managing r domestic support obligations,
Yes. List all pay	ments to a	n insider.				
			Dates of payment	Total amount paid	Amount you still owe	Reason for this payment
Insider's Name						
Number Street						
City	State	Zip Code				
Insider's Name			-			
Number Street						
City	State	Zip Code				
insider? Include payments on  No	debts guar		ed by an insider.	Total amount paid	Amount you still owe	Reason for this payment
						Include creditor's name
Insider's Name						
Number Street						
City	State	Zip Code				
Insider's Name						
Number Street						
City	State	Zip Code				

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Debtor 1 Carlos Cochran Case number (if known) Part 4: Identify Legal Actions, Repossessions, and Foreclosures 9. Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details. Nature of the case Status of the case Court or agency Case title Pending Court Name On appeal Case number NumberStreet Concluded City State Zip Code Case title Pending Court Name On appeal Case number NumberStreet Concluded Citv State Zip Code Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. Describe the property Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied. Describe the property Date Value of the property Creditor's Name Explain what happened Number Street Property was repossessed. Property was foreclosed. Property was garnished. City State Zip Code Property was attached, seized, or levied.

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Debt		Carlos First Name	L. Middle Name	Cochran Last Name	Case number (if known)		
11.		thin 90 days before you filed counts or refuse to make a p No			ank or financial institution, s	et off any amour	its from your
	Ħ	Yes. Fill in the details.					
		•		Describe the action the	creditor took	Date action was taken	Amount
		Creditor's Name					
		Number Street					
				Last 4 digits of account n	umber: XXXX-		
		City State	Zip Code				
12.		hin 1 year before you filed fo pointed receiver, a custodiar		y of your property in the p	ossession of an assignee for	the benefit of c	reditors, a court-
	<b>V</b>	No Yes					
Part	 5:	List Certain Gifts and Co	ontributions				
						_	
13.		ithin 2 years before you filed	for bankruptcy, did y	ou give any gifts with a to	tal value of more than \$600	per person?	
	¥	No Yes. Fill in the details for ea	ach gift.				
		Gifts with a total value of r per person	_	Describe the gifts		Dates you gave the gifts	Value
		Person to Whom You Gave t	he Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you	F				
		Person to Whom You Gave t	he Gift				
		Number Street					
		City State	Zip Code				
		Person's relationship to you	·				

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Debtor	1 Carlos	L.	Cochran	Case number (if know	wn)	
	First Name	Middle Name	Last Name			
14. W	ithin 2 years before yo	u filed for bankruptov, die	d you give any gifts or contril	butions with a total value	of more than \$600	to any charity?
	<b>7</b> No.	a moa for bankraptoy, an	a you give any give or contin	outions with a total value	or more than \$000	to any onanty i
<u> -</u>		6 1 10 11				
L	Yes. Fill in the details	s for each gift or contribut	tion.			
	Gifts or contribution		Describe what you con	tributed	Date you	Value
	that total more than	1 \$600			contributed	
	-		_			
	Charity's Name					
			-			
	Number Street		_			
	. tumbor Guidet					
	City St	tate Zip Code	_			
	1:-404-:-1	_				
Part 6:	List Certain Losse	:5				
	Yes. Fill in the details  Describe the proper how the loss occurr	rty you lost and	Describe any insurance include the amount that	insurance has paid. List	Date of your loss	Value of property lost
			pending insurance claims A/B: Property.	s on line 33 of <i>Schedule</i>		
Part 7:	List Certain Paym	ents or Transfers				
In	No		or credit counseling agencies fo	,		
			Description and value of transferred	or any property	Date payment or transfer was made	Amount of payment
	Semrad Law Firm		Attorney's Fee - 500.00		6/26/2017	\$500.00
	Person Who Was Paid		_  ,			·
	11101 S. Western Av	enue	_			
	Number Street					
			_			
		inois 60643	_			
	City	tate Zip Code	_			
	Email or website addr	ress	-			
	Person Who Made the	e Payment, if Not You	-			
		•				
	Person Who Was Paid	d	_			
	Number Street		-			
			_			
	<u></u>		_			
	City St	tate Zip Code				
	Email or website addr	ress	-			
	Poroon Wha Mad- th	a Doumant if Nat Var	_			
	Person who Made th	e Payment, if Not You				

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Debt		Carlos	L.	Cochran	Case number (if	known)	
		First Name	Middle Name	Last Name		<u> </u>	
	help	nin 1 year before you filed you deal with your credi not include any payment or	itors or to make paym		ur behalf pay or tra	nsfer any property to a	nyone who promised to
	<b>✓</b>	No					
	Ш	Yes. Fill in the details.					
				Description and value of an transferred	y property	Date payment or transfer was made	Amount of payment
		Person Who Was Paid		-			
		Number Street					
		City State	Zip Code				
	Inclu and	transfers that you have alre	and transfers made as s	security (such as the granting of a	security interest or m	nortgage on your propert	y). Do not include gifts
		Yes. Fill in the details.					
	_			Description and value of pretransferred		pe any property or nts received or debts p nange	Date transfer was made
		Person Who Received Trans	nsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code ou				
		Person Who Received Trans	nsfer				
		Number Street					
		City State Person's relationship to yo	Zip Code ou				
۱9.	ben	nin 10 years before you fil eficiary? ese are often called asset-pr		d you transfer any property to a	self-settled trust o	or similar device of whi	ch you are a
	_	No	,				
	Ш	Yes. Fill in the details.		Description and value of t	he property transfe	erred	Date transfer was
							made
		Name of trust					

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Cochran Debtor 1 Carlos Case number (if known) First Name List Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units Part 8: 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Yes. Fill in the details. Last 4 digits of account Type of account or Date Last balance number instrument account was before closed, sold, closing or moved, or transfer transferred XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other City Zip Code State XXXX-Checking Person Who Was Paid Savings Number Street Money market Brokerage Other Zip Code 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? Yes. Fill in the details. Who else had access to it? Describe the contents Do you still have it? No Name of Financial Institution Name Number Street Number Street City State Zip Code State Zip Code 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? Yes. Fill in the details. Do you still Who else had access to it? Describe the contents have it? Name of Storage Facility Name Yes Number Street Number Street Citv State 7in Code City State Zip Code

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Cochran Debtor 1 Carlos Case number (if known) Part 9: Identify Property You Hold or Control for Someone Else 23. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. **✓** No Yes. Fill in the details. Where is the property? Describe the contents Value Owner's Name **NumberStreet** Number Street City State Zip Code State Zip Code **Give Details About Environmental Information** For the purpose of Part 10, the following definitions apply: ■ Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or toxic substances, wastes, or material into the air, land, soil, surface water, groundwater, or other medium, including statutes or regulations controlling the cleanup of these substances, wastes, or material. Site means any location, facility, or property as defined under any environmental law, whether you now own, operate, or utilize it or used to own, operate, or utilize it, including disposal sites. Hazardous material means anything an environmental law defines as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, contaminant, or similar term. Report all notices, releases, and proceedings that you know about, regardless of when they occurred. 24. Has any governmental unit notified you that you may be liable or potentially liable under or in violation of an environmental law? Yes. Fill in the details. Governmental unit Date of Environmental law, if you know it notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code Zip Code State 25. Have you notified any governmental unit of any release of hazardous material? Yes. Fill in the details. Governmental unit Environmental law, if you know it Date of notice Name of site Governmental unit Number Street **NumberStreet** City State Zip Code

City

State

Zip Code

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Debt		Carlos	L		Cochran	Case nu	mber (if known)	
		First Name	, N	fiddle Name	Last Name			
26.			/ in any judici	al or administ	rative proceeding under	any environmental l	aw? Include settlements and order	rs.
		No Yes. Fill in the det	ails.					
					Court or agency	N	lature of the case	Status of the case
		Case title			Court Name			Pending
		Case number			NumberStreet			On appeal
					City State	Zip Code		Concluded
Part	11:	Give Details Ab	out Your Bu	isiness or C	onnections to Any Bu	siness		
27.	With	nin 4 years before	you filed for b	ankruptcy, di	d you own a business or	have any of the follo	wing connections to any business?	•
		A member of A partner in a An officer, dir	a limited liabi a partnership ector, or mar	ity company (	ade, profession, or other LLC) or limited liability pa ve of a corporation equity securities of a corp	artnership (LLP)	me or part-time	
		No. None of the a	bove applies.	Go to Part 12	2.			
	<b>✓</b>	Yes. Check all tha	at apply above	e and fill in the	details below for each b	ousiness.		
					Describe the natu	ure of the business	Employer Identification nu include Social Security nu	
		Cochran, Carlos Business Name 14214 S. Kedzie			_		EIN:	
		Number Street Blue Island	Illinois	60406	Name of accounts	ant or bookkeeper	Dates business existed	
		City	State	Zip Code			From To	<u> </u>
					Describe the natu	ure of the business	Employer Identification nu include Social Security nu	
		Business Name			_		EIN:	
		Number Street			_		Dates business existed	
					Name of accounts	ant or bookkeeper		
		City	State	Zip Code			From To	
					Describe the natu	ure of the business	Employer Identification nu include Social Security nu	
		Business Name			_		EIN:	
		Number Street			Name of account	ant or bookkeeper	Dates business existed	
		City	State	Zip Code			From To	

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Debt	or 1 Carlos		L.	Cochran	Case number (if known)
	First Nar	ne	Middle Name	Last Name	
28.	creditors,	ears before you filed for other parties.  Ill in the details below.	r bankruptcy, did yc	u give a financial stateme	nt to anyone about your business? Include all financial institutions,
	_			Date issued	
	Name			MM/DD/YYYY	
	Numl	per Street		=	
	, tuin	or Groot			
	City	State	Zip Code	_	
Part	10 Sign	Below			
			nes up to \$250,000,		rty, or obtaining money or property by fraud in connection with 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
		Signature of Debto			Signature of Debtor 2
		Date 6/28/2018			Date
	No Yes	ch additional pages to		Financial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
	Yes. Na	ne of person			Attach the Bankruptcy Petition Preparer's Notice,  Declaration, and Signature (Official Form 119)

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B2030 (Form 2030) (12/15)

#### **UNITED STATES BANKRUPTCY COURT**

		Nortnern	District of Illinois		
In re	Carlos L. Cochran		Case I	No	-
	Debtor		Ob		(If known)
			Chapt	er	Chapter 13
	DISCLOSURE OF	COMPENSA	TION OF ATTORN	NEY FOR	DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and F compensation paid to me within one rendered or to be rendered on behalf	year before the filing	of the petition in bankruptcy, o	r agreed to be pa	id to me, for services
	For legal services, I have agreed to ac	cept			\$4,000.00
	Prior to the filing of this statement I h	nave received			\$500.00
	Balance Due				\$3,500.00
2.	The source of the compensation paid	I to me was:			
	<b>Debtor</b>	Other (s	specify)		
3.	The source of the compensation paid	I to me is:			
	<b>✓</b> Debtor	Other (s	specify)		
4.	I have not agreed to share the ab members and associates of my la		ensation with any other person (	unless they are	
	I have agreed to share the above- members or associates of my law the people sharing in the compet	firm. A copy of the a			
5.	In return for the above-disclosed fee, a. Analysis of the debtor's finan bankruptcy;	_	· ·	-	<del>-</del>
	b. Preparation and filing of any p	petition, schedules, s	tatements of affairs and plan wh	nich may be requ	ired;
	c. Representation of the debtor	at the meeting of cre	ditors and confirmation hearing	, and any adjourr	ned hearings thereof;
	d. Representation of the debtor	in adversary proceed	ings and other contested bankr	uptcy matters;	
6.	By agreement with the debtor(s), the	above-disclosed fee	does not include the following s	services:	
		CE	RTIFICATION		
	certify that the foregoing is a complet or(s) in this bankruptcy proceedings.	e statement of any aq	greement or arrangement for pay	ment to me for r	epresentation of the
	6/28/2018		/s/ Morsheda Has	shem	
	Date		Signature of Attor	ney	
			Semrad Law Fir	m	
			Name of law fin	m	_

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### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

Chapter 13 gives debtors important rights, such as the right to keep property that could otherwise be lost through repossession or foreclosure, but Chapter 13 also puts burdens on debtors, such as the burden of making complete and truthful disclosures of their financial situation. It is important for debtors who file a Chapter 13 bankruptcy case to understand their rights and responsibilities in bankruptcy. In this connection, the advice of an attorney is often crucial. Debtors are entitled to certain services from their attorneys, but debtors also have responsibilities to their attorneys. In order to assure that debtors and their attorneys understand their rights and responsibilities in the Chapter 13 process, the judges of the Bankruptcy Court for the Northern District of Illinois have approved this agreement, setting out the rights and responsibilities of both debtors in Chapter 13 and their attorneys, including how their attorneys will be paid for their services in the Chapter 13 case. By signing this agreement, debtors and their attorneys accept these responsibilities.

The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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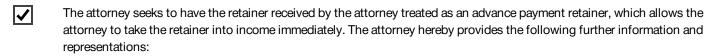
- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.



- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. *Improper conduct by the debtor*. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. *Discharge of the attorney*. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$380.23
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$70.23 for expenses, leaving a balance due of \$3,880.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date:	6/28/2018	
Signed:	1	
/s/ Carl	os Cochran	
		/s/ Morsheda Hashem
Debtor(	s)	Attorney for Debtor(s)

Do not sign if the fee amounts at top of this page are blank.

# Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

#### This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

### The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

#### **Chapter 7: Liquidation**

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A-1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A-2).

If your income is above the median for your state, you must file a second form - the *Chapter 7 Means Test Calculation* (Official Form 122A-2). The calculations on the form - sometimes called the *Means Test* - deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

#### Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

#### **Read These Important Warnings**

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

### Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

# Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans.
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

#### Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy\_forms.html#procedure.

### Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury either orally or in writing in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

### Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

# Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days **before** you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: <a href="http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html">http://www.justice.gov/ust/eo/hapcpa/ccde/cc\_approved.html</a>

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Cochran, Carlos L.	Case No	
	Debtor(s)	Case No.	
		Chapter.	Chapter13
	VERIFICA	TION OF CREDITOR MAT	ΓRIX
T nowledg	The above named Debtors hereby verify thge.	at the attached list of creditors is t	rue and correct to the best of their
ate:	6/28/2018	/s/ Cochran, Ca	rlos L.
		Cochran, Carlos Signature of De	

Federal Loan Service. 400 Maryland Ave SW Washington, DC, 20202

MIDSTATE COLLECTION SO 2009B Round Barn Rd Champaign, IL, 61821

UNITED RESOURCE SYSTEM 3501 S TELLER ST LAKEWOOD, CO, 80235

DIVERSIFIED CONSULTANT 10550 DEERWOOD PARK BLVD JACKSONVILLE, FL, 32256

CREDIT COLLECTION SERV 725 CANTON ST NORWOOD, MA, 02062

City of Chicago - Parking and red Light Tickets 121 N. LaSalle Street Chicago, IL, 60602

Harris, Arnold 111 West Jackson B Chicago, IL, 60604

IL Secretary of State 2701 S. Dirksen Parkway Springfield, IL, 62723

Cook County Hospital P.O. Box 70121 Chicago, IL, 60673

IL Tollway PO Box 5544 Chicago, IL, 60608

Capital One Po Box 71083 Charlotte, NC, 28272 IRS 1 PO Box 7346 Philadelphia, PA, 19101

ComEd 1919 Swift Drive Oak Brook, IL, 60523

Nicor Gas Po Box 549 Aurora, IL, 60507

Peoples Gas PO BOX 2968 Milwaukee, WI, 53201

Old Second National Bank 37 S River street Aurora, IL, 60506

TCF 200 Lake Street East Wayzata, MN, 55391

Country Club Hills Municipality 4200 W 183rd Street Country Club Hills, IL, 60478

Beverly Park Medical Center 11012 S Western Ave Chicago, IL, 60643

Spangler Jennings & Dougherty 8396 Mississippi St Merrillville, IN, 46410

The Law Offices of Dworkin and Maciariello 134 N LaSalle Dr #650 Chicago, IL, 60602

GM Financial ATT: Mandy Youngblood PO Box 183853 Arlington, TX, 76096 PORTFOLIO RECOV ASSOC PO Box 41067 Norfolk, VA, 23541

Federal Loan Serivce P.O. Box 60610 Cornwall, PA, 17016

IDOR-Bankruptcy Section Po Box 851388 Minneapolis, MN, 55485

Bedford Park Police Department Photo Enforcement Program PO BOX 742503 Cincinnati, OH, 45274

PORTFOLIO RC 120 Corporate Boulevard Norfolk, VA, 23502

### UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

### RIGHTS AND RESPONSIBILITIES AGREEMENT BETWEEN CHAPTER 13 DEBTORS AND THEIR ATTORNEYS

(Court-Approved Retention Agreement, Use for cases filed on or after September 19, 2016)

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The Bankruptcy Code may require a debtor's attorney to provide the debtor with certain documents and agreements at the start of the representation. The terms of this court-approved agreement take the place of any conflicting provision in an earlier agreement. This agreement cannot be modified in any way by other agreements. Any provision of another agreement between the debtors and the attorney that conflicts with this agreement is void.

#### A. BEFORE THE CASE IS FILED

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- 1. Discuss with the attorney the debtor's objectives in filing the case.
- 2. Provide the attorney with full, accurate and timely information, financial and otherwise, including properly documented proof of income.

#### THE ATTORNEY AGREES TO:

- 1. Personally counsel the debtor regarding the advisability of filing either a Chapter 13 or a Chapter 7 case, discuss both procedures (as well as non-bankruptcy options) with the debtor, and answer the debtor's questions.
- 2. Personally explain to the debtor that the attorney is being engaged to represent the debtor on all matters arising in the case, as required by Local Bankruptcy Rule and explain how and when the attorney's fees and the trustee's fees are determined and paid.
- 3. Personally review with the debtor and sign the completed petition, plan, statements, and schedules, as well as all amendments thereto, whether filed with the petition or later. (The schedules may be initially prepared with the help of clerical or paralegal staff of the attorney's office, but personal attention of the attorney is required for the review and signing.)
- 4. Timely prepare and file the debtor's petition, plan, statements, and schedules.
- 5. Explain to the debtor how, when, and where to make all necessary payments, including both payments that must be made directly to creditors and payments that must be made to the Chapter 13 trustee, with particular attention to housing and vehicle payments.

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6. Advise the debtor of the need to maintain appropriate insurance.

#### B. AFTER THE CASE IS FILED

#### THE DEBTOR AGREES TO:

- 1. Make the required payments to the trustee and to whatever creditors are being paid directly, or, if required payments cannot be made, to notify the attorney immediately.
- 2. Appear punctually at the meeting of creditors (also called the "341 meeting") with recent proof of income and a picture identification card. (If the identification card does not include the debtor's social security number, the debtor must also bring to the meeting a social security card.) The debtor must be present in time for check-in and, when the case is called, for the actual examination.
- 3. Notify the attorney of any change in the debtor's address or telephone number.
- 4. Inform the attorney of any wage garnishments or liens or levies on assets that occur or continue after the filing of the case.
- 5. Contact the attorney immediately if the debtor loses employment, has a significant change in income, or experiences any other significant change in financial situation (such as serious illness, marriage, divorce or separation, lottery winnings, or an inheritance).
- 6. Notify the attorney if the debtor is sued or wishes to file a lawsuit (including divorce.)
- 7. Inform the attorney if any tax refunds to which the debtor is entitled are seized or not received when due from the IRS or Illinois Department of Revenue.
- 8. Contact the attorney before buying, refinancing, or selling real property, and before entering into any loan agreement.
- 9. Supply the attorney with copies of all tax returns filed while the case is pending.

#### THE ATTORNEY AGREES TO:

- 1. Advise the debtor of the requirement to attend the meeting of creditors, and notify the debtor of the date, time, and place of the meeting.
- 2. Inform the debtor that the debtor must be punctual and, in the case of a joint filing, that both spouses must appear at the same meeting.
- 3. Provide knowledgeable legal representation for the debtor at the meeting of creditors (in time for check-in and the actual examination) and, unless excused by the trustee, for the confirmation hearing.

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- 4. If the attorney will be employing another attorney to attend the 341 meeting or any court hearing, personally explain to the debtor in advance, the role and identity of the other attorney and provide the other attorney with the file in sufficient time to review it and properly represent the debtor.
- 5. Timely submit to the Chapter 13 trustee properly documented proof of income for the debtor, including business reports for self-employed debtors.
- 6. Timely respond to objections to plan confirmation and, where necessary, prepare, file, and serve an amended plan.
- 7. Timely prepare, file, and serve any necessary statements, amended statements, and schedules and any change of address, in accordance with information provided by the debtor.
- 8. Monitor all incoming case information (including, but not limited to, Order Confirming Plan, Notice of Intent to Pay Claims, and 6-month status reports) for accuracy and completeness. Contact the trustee promptly regarding any discrepancies.
- 9. Be available to respond to the debtor's questions throughout the term of the plan.
- 10. Prepare, file, and serve timely modifications to the plan after confirmation, when necessary, including modifications to suspend, lower, or increase plan payments.
- 11. Prepare, file, and serve necessary motions to buy or sell property and to incur debt.
- 12. Object to improper or invalid claims.
- 13. Timely respond to the Chapter 13 trustee's motions to dismiss the case, such as for payment default, or unfeasibility, and to motions to increase the percentage payment to unsecured creditors.
- 14. Timely respond to motions for relief from stay.
- 15. Prepare, file, and serve all appropriate motions to avoid liens.
- 16. Prepare, file, and serve a notice of conversion to Chapter 7, pursuant to § 1307(a) of the Bankruptcy Code and Local Bankruptcy Rule 1017-1.
- 17. Provide any other legal services necessary for the administration of the case.

### C. TERMINATION OR CONVERSION OF THE CASE AFTER ENTRY OF AN ORDER APPROVING FEES AND EXPENSES

- 1. Approved fees and expenses paid under the provisions set out below are generally not refundable in the event that the case is dismissed prior to its completion, unless the dismissal is due to a failure by the attorney to comply with the duties set out in this agreement. If such a dismissal is due to a failure by the attorney, the court may order a refund of fees on motion by the debtor.
- 2. If the case is dismissed after approval of the fees and expenses but before payment of all allowed fees and expenses, the order entered by the Bankruptcy Court allowing the fees and expenses is not a judgment against the debtor for the unpaid fees and expenses based on contract law or otherwise.
- 3.If the case is converted to a case under Chapter 7 after approval of the fees and expenses under this agreement but before the payment of all fees and expenses, the attorney will be entitled to an administrative claim in the Chapter 7 case for any unpaid fees and expenses, pursuant to § 726(b) of the Bankruptcy Code, plus any conversion fee the attorney pays on behalf of the debtor.

#### D. RETAINERS AND PREVIOUS PAYMENTS

- 1. The attorney may receive a retainer or other payment before filing the case but may not receive fees directly from the debtor after the filing of the case. Unless the following provision is checked and completed, any retainer received by the attorney will be treated as a security retainer, to be placed in the attorney's client trust account until approval of a fee application by the court.
- The attorney seeks to have the retainer received by the attorney treated as an advance payment retainer, which allows the attorney to take the retainer into income immediately. The attorney hereby provides the following further information and representations:
- (a) The special purpose for the advance payment retainer and why it is advantageous to the debtor is as follows:

  Client understands that any funds that client is rendering to The Semrad Law Firm, LLC as part of the advance payment retainer shall immediately become the property of The Semrad Law Firm, LLC in exchange for a commitment by The Semrad Law Firm, LLC to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC and will be used for general expense of the firm. Client further understands that it is ordinarily the client's option to deposit funds with an attorney that shall remain client's property as security for future services.

  However, The Semrad Law Firm, LLC does not represent clients under such a security retainer because the preparation of a bankruptcy cases requires many disparate tasks and functions for the attorney and support staff; some of which require legal expertise while other may be only ministerial in nature. Client further understands that the benefit that client is receiving under the fee arrangement is the commitment of The Semrad Law Firm, LLC to perform any and all work reasonably necessary to represent client's interest absent any extraordinary circumstance.
- (b) The retainer will not be held in a client trust account and will become property of the attorney upon payment and will be deposited into the attorney's general account;
- (c) The retainer is a flat fee for the services to be rendered during the chapter 13 case and will be applied for such services without the need for the attorney to keep detailed hourly time records for the specific services performed for the debtor;
- (d) Any portion of the retainer that is not earned or required for expenses will be refunded to the client; and
- (e) The attorney is unwilling to represent the debtor without receiving an advanced payment retainer because of the nature of the chapter 13 case, the fact that the great majority of services for such case are performed prior to its filing, and the risks associated with the representation of debtors in bankruptcy cases in general.
- 2. In any application for compensation, the attorney must disclose to the court any fees or other compensation paid by the debtor to the attorney for any reason within the one year before the case filing, including the date(s) any such fees were paid.

#### E. CONDUCT AND DISCHARGE

- 1. *Improper conduct by the attorney.* If the debtor disputes the sufficiency or quality of the legal services provided or the amount of the fees charged by the attorney, the debtor may file an objection with the court and request a hearing.
- 2. Improper conduct by the debtor. If the attorney believes that the debtor is not complying with the debtor's responsibilities under this agreement or is otherwise engaging in improper conduct, the attorney may apply for a court order allowing the attorney to withdraw from the case.
- 3. Discharge of the attorney. The debtor may discharge the attorney at any time.

#### F. ALLOWANCE AND PAYMENT OF ATTORNEYS' FEES AND EXPENSES

- 1. Any attorney retained to represent a debtor in a Chapter 13 case is responsible for representing the debtor on all matters arising in the case unless otherwise ordered by the court. For all of the services outlined above, the attorney will be paid a flat fee of \$4,000.00
- 2. In addition, the debtor will pay the filing fee in the case and other expenses of \$380.23
- 3. Before signing this agreement, the attorney has received, \$500.00 toward the flat fee, leaving a balance due of \$3,500.00; and \$70.23 for expenses, leaving a balance due of \$3,880.23
- 4. In extraordinary circumstances, such as extended evidentiary hearings or appeals, the attorney may apply to the court for additional compensation for these services. Any such application must be accompanied by an itemization of the services rendered, showing the date, the time expended, and the identity of the attorney performing the services. The debtor must be served with a copy of the application and notified of the right to appear in court to object.

Date: 6/28/2018			Sec.	
Signed:				
/s/Carlos Cochran	/s/ Mors	sheda Hashem M	whole of	4
Debtor(s)	Attorne	y for Debtor(s)		

Do not sign if the fee amounts at top of this page are blank.

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

Re: Agreement Regarding Priority Treatment of The Semrad Law Firm LLC's Fees and Expenses

#### Dear Carlos Cochran,

Thank you for choosing The Semrad Law Firm LLC (the Firm) to represent you in connection with your Chapter 13 bankruptcy case. In addition to the terms contained in the Court Approved Retention Agreement (CARA) it is our policy to confirm in writing how and when the Firm's fees and expenses will be paid. If there are any terms contained in this document that are in conflict with CARA, those terms are void.

Aside from any initial retainer that you pay the Firm, you will be required to pay the Firm's fees and expenses through the Chapter 13 plan after it is approved by the Bankruptcy Court. Each month, you will pay the Trustee the amount stated in your Chapter 13 plan. The Trustee will then disburse that money out according to the provisions of your plan to the Firm and other creditors.

The model Chapter 13 plan gives fourth priority to attorneys' fees, after the Trustee's fees, current mortgage payments, and payments to secured creditors listed in Section 3.1, 3.2, or 3.3 (for example, payments due to lenders on a loan to purchase a car, furniture, appliance or other item of personal property). The Firm intends to alter this priority scheme by modifying the model Chapter 13 plan to provide for payment of the Firm's attorney's fees and costs before any payments are made to your other creditors. That means that the money you send to the Trustee each month will first be paid to the Firm and not to pay the claims of your other creditors until the Firm's fees and expenses are paid in full. Such claims of other creditors include your car note, other financed personal property, parking tickets, taxes, and any claims of other creditors that may be included in your plan.

Aside from the Firm's commitment to perform any and all work reasonably necessary to represent you in this bankruptcy case without requiring you to pay a substantial amount of the fees and expenses up front, there is no benefit to you from this priority treatment of the Firm's fees and expenses. Furthermore, this arrangement presents certain risks. In the event that your case is dismissed before completion of the plan or if you decide to convert your case to a case under Chapter 7, it is likely that the Firm's attorneys' fees will have been paid while little of your other debts are paid.

In addition, there is the possibility that a creditor or the Trustee may object to the Firm being paid under this altered priority arrangement. In the event of such an objection, the Firm may lower that amount that the Firm will receive each month and increase the

#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

monthly payment to such creditor in order to resolve the objection. However, creditors may seek to recover additional attorneys' fees as a result of any such objection and you may be required to pay the creditors' additional attorneys' fees over time through the Chapter 13 Plan.

A Chapter 13 plan will be filed on your behalf to repay your creditors. Your Chapter 13 plan payment will be \$750.00 at the time of filing. This monthly Chapter 13 plan payment can be subject to change during your case. Included within this monthly plan payment is the Firm's compensation for representing you during the Chapter 13. You will be paying the Firm an attorney fee of \$4,000.00, with an initial down payment of \$500.00.

Within the Chapter 13 plan payment, you will be paying back your creditors and the Firm's attorney fees:

- 1. The trustee will be paid an estimated 6% of the plan payment.
- 2. The Firm's fees will be paid at approximately \$431.00/mo.
- 3. GM Financial will be paid \$21,920.00 at 15% APR at a fixed monthly payment of \$274.00/mo until Firm's Fees are paid. Commencing with the December 2019 plan payment, GM Financial shall receive set payments in the amount of \$705.00 per month.
- 4. General Unsecured Creditors will be paid 10% pro-rata after all other creditors.
- 5. Student loan debts owed to Federal Loan Service are currently in deferment and the Trustee shall not pay any claim filed by said debts.

If you do not wish to pay the Firm's attorneys' fees and expenses ahead of your creditors as set forth above, you have the following options:

- A. You can elect to pay the Firm an upfront retainer of \$1,500 prior to filing your case and elect for the plan to pay your car note (and/or other claims secured by personal property) and mortgage arrears in equal set monthly payments along with the Firm's fees and expenses; or
- B. You can seek representation by another firm under a different payment arrangement.

Please carefully review this letter. If the terms are not consistent with your understanding of our engagement in any respect or if you have any questions concerning the same, please notify us promptly. You can also seek advice from other counsel regarding your rights under this arrangement. Firm policy and a prior court order require that we receive confirmation of your

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#### THE SEMRAD LAW FIRM

Attorneys & Counselors at Law 20 S. Clark, 28<sup>th</sup> Floor Chicago, IL 60603 (312) 913-0625

acceptance of these terms in the form of your signature at the bottom of this letter. Please return the signed copy to the Firm as soon as possible.

Very Truly Yours,

THE SEMRAD LAW FIRM LLC

One of its Attorneys

Date: 06/28/2018

Accepted:

Carlos Cochran

Date: 06/28/2018

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Debtor 1 Carlos First Name		chran Case n	umber (if known)		
	estions for Reporting Purposes	r Hame			
16. What kind of debts do you have?	<ul> <li>16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."  No. Go to line 16b.  Yes. Go to line 17.</li> <li>16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment.  No. Go to line 16c.  Yes. Go to line 17.</li> <li>16c. State the type of debts you owe that are not consumer debts or business debts.</li> </ul>				
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	No. I am not filing under Chapter 7  Yes. I am filing under Chapter 7  expenses are paid that fur  No.  Yes.		exempt property is exc to unsecured creditors	luded and administrative ?	
18. How many creditors do you estimate that you owe?	✓ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000	50,0	001-50,000 001-100,000 e than 100,000	
19. How much do you estimate your assets to be worth?		\$1,000,001-\$10 mi \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	nillion	0,000,001-\$1 billion 000,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion	
20. How much do you estimate your liabilities to be?	□ \$0-\$50,000 □ \$50,001-\$100,000 □ \$100,001-\$500,000 □ \$500,001-\$1 million	\$1,000,001-\$10 mi \$10,000,001-\$50 r \$50,000,001-\$100 \$100,000,001-\$50	nillion	0,000,001-\$1 billion 000,000,001-\$10 billion ,000,000,001-\$50 billion e than \$50 billion	
Part 7: Sign Below	I have everyly ad this matition, an	d I de al ava con alay a ava alay a af		ation muscipled is to the second	
For you	I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct.  If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7.  If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b).				
	I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.  I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.  /s/ Carlos Cochran  Signature of Debtor 1				
	Executed on 6/28/2018 Executed on MM / DD / YYYY				

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Fill in this inforr	nation to identify your cas	se:			
Debtor 1	Carlos	L.	Cochran		
Debtor 2	First Name	Middle Name	Last Name	4	
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States B	ankruptcy Court for the:	Northern	District of Illinois		
Case number		×	(State)		
(If known)					
Official I	Form 106Dec	2			Check if this is an amended filing
Declarati	on About an I	ndividual Debt	or's Schedule	es	12/1
If two married p	people are filing together	, both are equally respor	sible for supplying corre	ect information.	
money or prope				Making a false statement, concealing property, to \$250,000, or imprisonment for up to 20 years,	
Part 1: Sign	Below				
Did you na	av or agree to hav someo	ne who is NOT an attorn	ey to help you fill out ban	ankruntov forms?	
	ly or agree to pay someo	ne who is NOT all attorn	ey to help you lill out ball	initiapitely forms:	
✓ No					
Yes. N	Name of person		Attach Bankruptcy Signature (Official I	ry Petition Preparer's Notice, Declaration, and I Form 119).	
	nalty of perjury, I declare are true and correct.	that I have read the sum	mary and schedules filed	ed with this declaration and	
that they	are true and correct.	0 0	n		

Signature of Debtor 2

MM/DD/YYYY

/s/ Carlos Cochran
Signature of Debtor 1

Date 6/28/2018

MM/DD/YYYY

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Debt	tor 1 Carlos	L.	Cochran	Case number (if known)			
	First Name	Middle Name	Last Name				
28.	28. Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties.						
	✓ No ✓ Yes. Fill in the details	below.					
			Date issued				
	Name		MM/DD/YYYY	_			
	Number Street						
	City	State Zip Code	_				
Part	12: Sign Below						
I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.							
	* /s/ Carlos Cochran Carlos Coche *						
Signature of Debtor 1				Signature of Debtor 2			
	Date 6/28	7/2018		Date			
- 0	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?						
r	No No						
	Yes						
	Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?						
Г	<b>√</b> No						
Ī	Yes. Name of person			Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).			

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#### **UNITED STATES BANKRUPTCY COURT**

**Northern District of Illinois** 

In re:	Cochran, Carlos L.		Case No		
	Debtor(s)				
			Chapter.	Chapter13	
	VE	RIFICATION OF (	CREDITOR M.	ATRIX	
knowled	The above named Debtors hereb	y verify that the attache	d list of creditors i	s true and correct to the besi	t of their
Date:	6/28/2018		/s/ Cochran,	Carlos L. Caulos	Coche
			Cochran, Ca Signature of	mos L.	<del></del>
				U. 1. 1995 - 2.00	
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		THE RESERVE OF THE PARTY OF THE		State of the whole of the state	
				is .	
		· Carra			
				3	

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Debto	r 1 Carlos First Name	L. Middle Name	Cochran Last Name	Case number (if known)			
16		amily income that applies to					
10.	16a. Fill in the state in w		Illinois				
		f people in your household.	1				
		mily income for your state and s	ize of		\$52,410.00		
	household		To find a	a list of applicable median income amounts, go online			
17			for this form. This list may	y also be available at the bankruptcy clerk's office.			
17.	17. How do the lines compare?  17a.     Line 15b is less than or equal to line 16c. On the top of page 1 of this form, check box 1, Disposable income is not determined						
				of Disposable Income (Official Form 122C-2).			
	U.S.C. § 1325		Calculation of Disposa	k box 2, Disposable income is determined under 11 ble Income (Official Form 122C-2). On line 39 of that			
Part :	Calculate Your C	ommitment Period Under	11 U.S.C. §1325(b)(	4)			
18.	Copy your total averag	e monthly income from line 1	1.		\$1,076.79		
19.				not filing with you, and you contend that calculating the our spouse's income, copy the amount from line 13.			
	19a. If the marital adjust	ment does not apply, fill in 0 on	line 19a.		-\$0.00		
	19b. Subtract line 19a	from line 18.			\$1,076.79		
20.	Calculate your current	monthly income for the year.	Follow these steps:				
	20a. Copy line 19b.	MANARAKANANANANANANANANANANANAN		CONTROL CONTRO	\$1,076.79		
	Multiply by 12 (the	number of months in a year).	- 1		x 12		
	20b. The result is your current monthly income for the year for this part of the form.						
	20c. Copy the median family income for your state and size of household from line 16c.						
21. How do the lines compare?							
Line 20b is less than line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 3, The commitment period is 3 years. Go to Part 4.							
	Line 20b is more than or equal to line 20c. Unless otherwise ordered by the court, on the top of page 1 of this form, check box 4, The commitment period is 5 years. Go to Part 4.						
Part	: Sign Below						
	Discipation have I de		- A All - 1 - 6 All All 1	- Markey and in the standard of the standard o			
	By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.						
	* /s/ Carlos Cochran						
	Signature of De	btor 1		Signature of Debtor 2			
	Date 6/28/201	8	[	Date			
	MM/DD/	<del>////</del>		MM/DD/YYYY			
	If you checked 17a, do NOT fill out or file Form 122C-2. If you checked 17b, fill out Form 122C-2 and file it with this form. On line 39 of that form, copy your current monthly income from line 14 above.						